

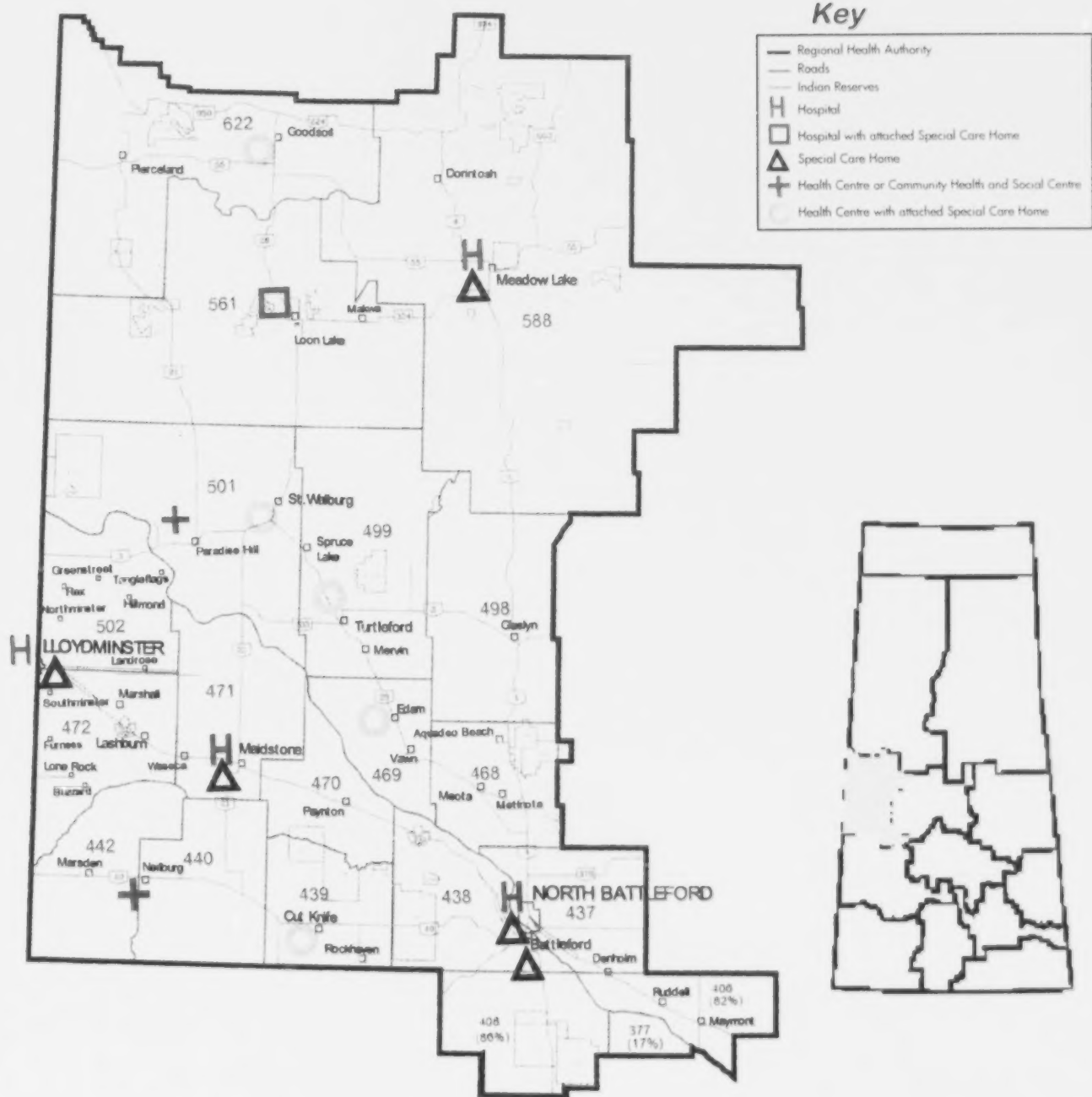


# Annual Report

## 2004 - 2005

*Healthy People in Healthy Communities*

# Prairie North Health Region





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For an electronic copy of this report, visit the Prairie North Health Region Web site at:

[www.pnrha.ca](http://www.pnrha.ca)

## *Letter of Transmittal*

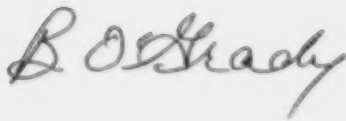
The Honourable John Nilson  
Minister of Health  
Province of Saskatchewan  
Legislative Building  
Regina, Saskatchewan  
S4S 0B3

Dear Minister Nilson:

Prairie North Regional Health Authority is pleased to provide you and the residents of our Health Region with our 2004-05 Annual Report.

This report provides the audited financial statements of Prairie North Health Region for the year ended March 31, 2005, and outlines our Region's activities and accomplishments for the period.

Respectfully submitted,



Bonnie O'Grady  
Chairperson  
Prairie North Regional Health Authority





## ***Management Discussion and Analysis***

### **Who We Are**

#### **STRATEGIC DIRECTION**

In December 2001, the Government of Saskatchewan set out a clear vision for the province's health system:  
"Building a province of healthy people and healthy communities."

In support of this vision and consistent with it, Prairie North RHA adopted an identical direction through our own Vision, Mission, and Values statements. In the past year, the Board of Directors of Prairie North Health Region reviewed and reaffirmed our direction.

#### **Vision**

"Healthy People in Healthy Communities."

#### **Mission**

"Working together to promote and support healthy living in healthy communities."

#### **Values**

Accountability and Responsibility to sustain the future of our health care resources.

Respect, Compassion, and Dignity for all people, regardless of cultural, social and economic factors.

Trust and Integrity in everything we do.

Appropriate Access to Quality health services: the right service at the right time in the right place.

Creativity and Innovation that support learning, partnerships, and an ongoing commitment to progress.

Saskatchewan Health has also established a common set of goals and objectives for the health system. Prairie North Regional Health Authority has adopted these goals and objectives to guide us in our planning and initiatives toward achieving our Vision. During the 2004-05 operating year, Board members reaffirmed the goals for Prairie North Health Region.

### **Goal**

#### Improved Access to Quality Health Services

- Objectives:
- Responsive, coordinated primary health care
  - Reduce waiting times for surgical procedures
  - Improve emergency medical care
  - Improved hospital, specialized services and long-term care

### **Goal**

#### Effective Health Promotion and Disease Prevention

- Objectives:
- Better promotion of health and disease prevention
  - Improve the health of northern and Aboriginal communities

### **Goal**

#### Retain, Recruit and Train Health Providers

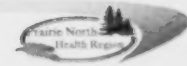
- Objectives:
- Improve utilization and availability of health human resources
  - Develop representative work places
  - Create healthier more effective work places

### **Goal**

#### A Sustainable, Efficient, Accountable and Quality Health System

- Objectives:
- Ensure quality, effective health care
  - Appropriate governance, accountability and management for the health sector
  - Sustain publicly funded and publicly administered Medicare





## GOVERNANCE AND ORGANIZATION

### Roles and Responsibilities

Prairie North Regional Health Authority is one of 12 RHAs established in August 2002 with proclamation of *The Regional Health Services Act*. The Act defines the roles and responsibilities of Regional Health Authority Boards to work as partners with the Minister of Health in ensuring coordinated, province-wide planning for the health system.

The Minister of Health is responsible for the overall strategic direction of Saskatchewan's health system, determines provincial health service priorities, and allocates resources for service delivery. The Regional Health Authority is responsible for the planning, organization, delivery and evaluation of the health services it provides within its boundaries.

Specific expectations for the Minister and Regional Health Authority Boards are defined under six broad categories:

Strategic Planning

Fiscal Management and Reporting

Relationships

Quality Management

Monitoring, Evaluation and Reporting

Management and Performance

An Accountability Document between each RHA and Saskatchewan Health further articulates the organizational, program and service expectations for each RHA, and links expectations with funding.

### Public Transparency

Maintaining public transparency in the decisions it makes, the actions and initiatives it implements, and overall, in the business it conducts is a fundamental tenet of Prairie North Regional Health Authority. The Authority believes in being accessible and accountable to the public, and continues its dedicated efforts to achieve these results through:

- Regular monthly Board meetings that are open to the public. The meetings are extensively advertised to invite participation and attendance. Presentations to Board meetings are welcome and encouraged. Policies to facilitate presentations, and to ensure responses to presentations, are in place.
- Regular monthly Board meetings that rotate through the Health Region's communities, facilitating access by local residents and community leaders. Local officials and members of the public are advised of the time, date and location of Prairie North Board meetings in their areas.
- Regular notification and invitation to all Prairie North Regular Board meetings to the Region's staff and physicians, and to local and area media.
- Broad distribution of *Board Notes*, usually within no more than three working days following a Regular Board meeting. The document features highlights of presentations, discussions and decisions from the meeting. *Board Notes* is distributed, using a variety of media, to staff and physicians, partnering agencies and organizations, community leaders, media and the general public.

- Monthly distribution of Board meeting minutes, once formally adopted by Board members, to facilities and programs in the Region. Copies of minutes are available to stakeholders.
- Development and broad distribution of the Board's Annual Report to internal and external stakeholders. The report will be available on-line via the Region's new web site.
- Willingness and availability of the Region's Chairperson, Chief Executive Officer, and other representatives to meet with community groups and organizations to discuss issues and matters of mutual concern.

### **Community Advisory Networks**

*The Regional Health Services Act* requires Health Authorities to establish one or more Community Advisory Networks (CANs) to help facilitate consultation with and input from local communities. CANs advise the Authority on broad issues related to the health of the community, and assist the Authority to understand the needs and priorities of communities and their residents.

The past year has seen continued development of CANs in Prairie North Health Region. The Region has been working with local health advisory committees in St. Walburg, Paradise Hill and Maidstone, primarily on issue-specific matters respectively including physician recruitment and retention, conversion of the Paradise Hill Hospital to a Health Centre, and redevelopment of Maidstone Hospital and Pine Island Lodge into a new Maidstone Integrated Facility. These advisory committees were functioning prior to the establishment of PNRHA in August 2002. Prairie North representatives attend meetings with these CANs on request.

Consultation has been ongoing with key stakeholders in the communities of Loon Lake/Goodsoil/Pierceland even though the group is not yet formally established as a CAN. Numerous meetings have been held between RHA officials and local and area representatives regarding service to this part of the Region, primarily in the context of Primary Health Care.

Just prior to the end of the 2004-05 operating year, Prairie North Board members endorsed a change in purpose and direction for what had previously been the Lloydminster Medical Recruitment Committee. The Committee is moving from its original focus on specialist recruitment for Lloydminster, to more of an advisory role to the Health Region, emphasizing advocacy and communication between the community and Health Board.

Initiative has come from a steering committee representing residents of Meadow Lake and area to establish a Community Advisory Network there. The CAN's purpose would be to provide advice to PNRHA regarding the provision of health services in Meadow Lake and area. Priorities would include education and two-way communication between the community and RHA. Approval of the proposal is anticipated to come early in 2005-06.

Prairie North is also in the preliminary stages of development of an Aboriginal Advisory Network with First Nations representation from across the Region.





## HEALTH CARE ORGANIZATIONS & OTHER THIRD PARTY RELATIONSHIPS

Prairie North Health Region works closely with a number of independent health care organizations and third party health service providers to deliver programs and services to residents of our Health Region. *The Regional Health Services Act* defines a health care organization (HCO) as:

- a prescribed organization that receives funding from an RHA to provide health services; or
- an affiliate, other than the RHA, that operates a hospital or not-for-profit special care home.

Under the legislation, HCOs must provide health services consistent with the Health Region's operational plan, and must conduct their activities and affairs in a manner that is consistent with and reflects the health goals and objectives of the RHA and the Minister of Health. Contracts must be in place between each HCO and the Health Region. The contracts set out the health services to be provided by the HCO and the funding to be received through the Health Region. According to the contracts, HCOs are required to submit audited financial statements and statistical information to the Health Region. Prairie North maintains strong linkages with each of its HCOs to assist in ensuring that operational and service requirements are met.

### Health Care Organizations

**Société Joseph Breton Inc.** – is Prairie North's only affiliate organization. The Société operates the Villa Pascal 40-bed long-term care facility in North Battleford.

**Canadian Mental Health Association, Battlefords Branch** – offers pre-vocational, vocational, public education, activity and advocacy services for individuals with mental health challenges.

**Edwards Society Inc.**, North Battleford – provides accommodation for mental health clients in a structured, supportive family-style living environment to enhance their quality of life and assist with greater self-reliance.

**Libbie Young Centre Inc.**, Lloydminster – provides support services for persons experiencing chronic and persistent mental illness. The Centre offers residential (long- and short-term) supportive apartment living, as well as day programming to clients of Lloydminster and area.

**Portage Vocational Society Inc.**, North Battleford – offers vocational rehabilitation, employment training and placement programs for clients suffering mental or emotional illness.

**Walter A. "Slim" Thorpe Recovery Centre Inc.**, Lloydminster – is a not-for-profit organization dedicated to education and delivery of services associated with chemical dependency and problem gambling. The Centre provides high quality recovery and prevention services that encourage positive solutions to alcohol, drugs and gambling problems.

**Emergency Medical Services** – Legislative change in the past year now defines contracted ambulance services as Health Care Organizations. Prairie North contracts with three key ambulance companies:

- Lloydminster Emergency Care Services;
- Marshall's Ambulance Care Ltd., St. Walburg; and
- WPD Ambulance Care Ltd., North Battleford

to provide pre-hospital emergency care to individuals in and around the companies' respective communities and contract areas. A contract is maintained with Cold Lake Ambulance Society of Cold Lake, Alberta to provide a limited amount of emergency road ambulance service in the far northwest part of Prairie North Health Region. Ambulance service to other communities and areas of Prairie North is provided by Region-owned and operated services in Cut Knife, Maidstone, Meadow Lake, and Neilburg.

### **Other Third Party Relationships**

Prairie North Health Region maintains contractual relationships with a variety of other health service providers to meet RHA and patient needs in health care disciplines including rehabilitation, pharmacy and laboratory services, to name a few. The contracts direct the expectations and responsibilities of Prairie North and the contractor, and indicate the reporting mechanisms and processes for communicating operational results and performance to the Authority. Among our major third party relationships are the following:

**East Central Health Region, Alberta** – Prairie North maintains a close relationship with its neighbouring health region (ECH) in Alberta to plan and deliver health services to Lloydminster and area residents. Prairie North operates the health services for all of Lloydminster, which straddles the Alberta/Saskatchewan border. Funding support from Alberta Health and Wellness through ECH accounts for approximately 10 per cent of Prairie North's total operating budget.

**KidsFirst** – Prairie North partners with local agencies in Meadow Lake and North Battleford to deliver targeted support to the most vulnerable families. KidsFirst is an early childhood development program intended to provide vulnerable children with the best possible start in life and to ensure they will be nurtured and supported by well functioning families and communities. Federal/provincial funding for the local program is channelled through PNHR as the accountable partner.

**Battlefords Family Health Centre** – Prairie North contracts with Battlefords Tribal Council (BTC) and BTC Indian Health Services for the provision of Primary Health Care Services in North Battleford through Battlefords Family Health Centre. The Centre is governed by a Board of Directors including Chiefs of the BTC communities. PNHR is represented on the Primary Health Management Committee.

**North Sask Laundry & Support Services Ltd., Prince Albert** – Prairie North is a shareholder in the company (NSL) and purchases its services to provide and maintain linen supplies to many PNHR facilities. Prairie North directly participates in the governance of NSL through mandated membership on the company's Board of Directors.

## **Regional Health Authority Board**

Prairie North Regional Health Authority is governed by a Board of Directors appointed by the Minister of Health and consisting of a maximum of 12 members. The Board functions as a single entity, without separate committees.

Prairie North RHA was fortunate to have operated with a full Board complement for 2002-03 and 2003-04. Regrettably by the end of the 2004-05 operating year, the Board complement was down to 10 members due to the resignation in September 2004 of Brenda Gregor-Nightingale of Meadow Lake, and the resignation in January 2005 of Zane Hansen, also of Meadow Lake.

Prairie North extends deepest appreciation to Ms. Gregor-Nightingale and Mr. Hansen for their valuable contributions and commitment to the Health Region as members of the Board.

Prairie North Regional Health Authority Board Members  
As of March 31, 2005



Back Row (from left): Don Whittaker, Marwayne, Alberta; Vicki Helm, Lloydminster; Muriel Conacher, Mervin; Ruth McCaffrey, Edam; Joan Hill, Goodsoil; Elaine Yaychuk, Meadow Lake.

Front Row (from left): Ben Christensen, North Battleford; Board Chairperson Bonnie O'Grady, Neilburg; Glenn Wouters, Meota; Don Young, Maidstone.

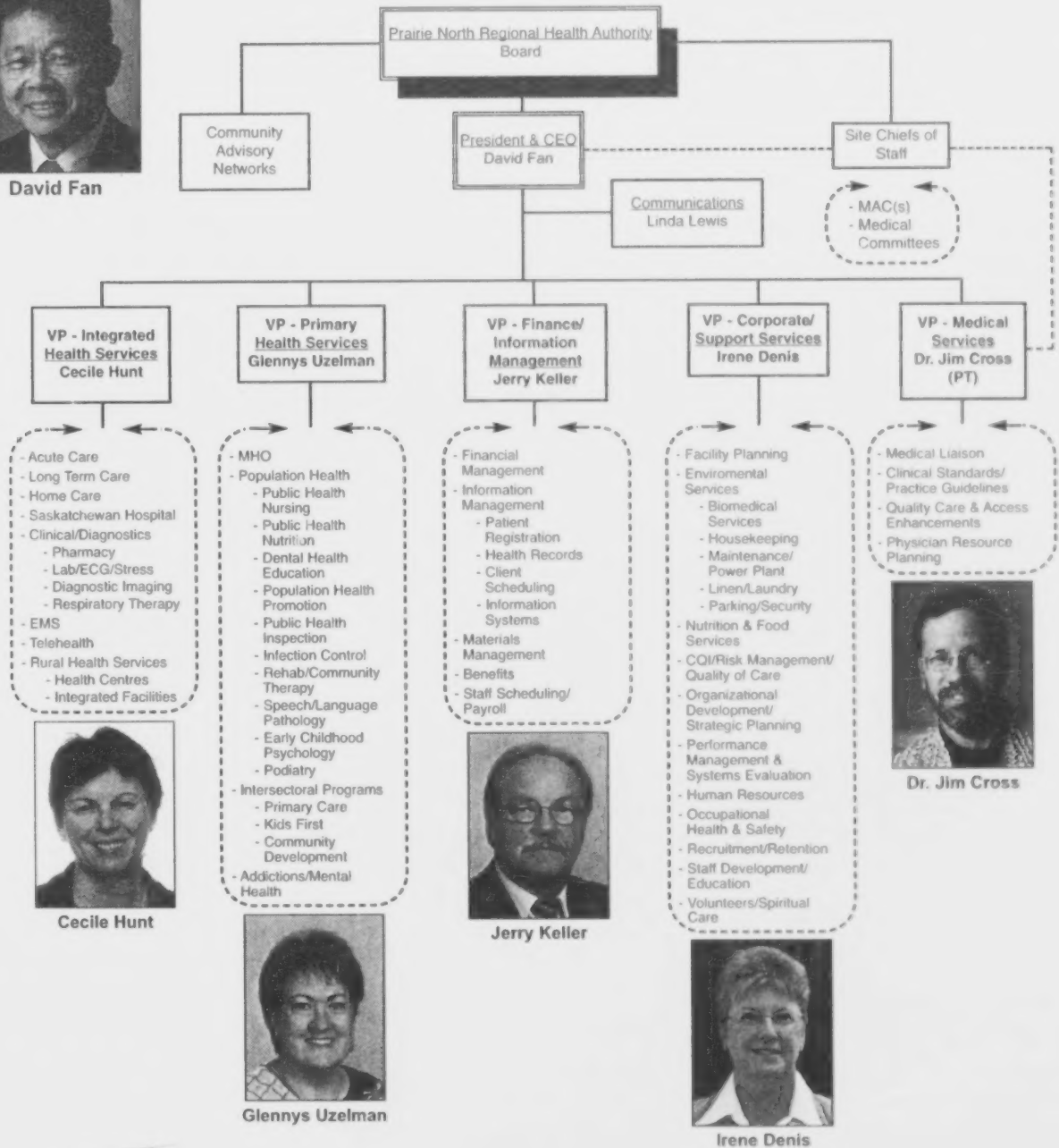
## Administrative Structure

The administrative structure of Prairie North Health Region functions on a decentralized model with corporate offices in The Battlefords, Lloydminster and Meadow Lake. The Battlefords location is the primary corporate office, with sites in Lloydminster and Meadow Lake serving as satellite locations. Each corporate office serves as the home site for at least one senior manager.

### Prairie North Health Region Organizational Structure As of March 31, 2005



David Fan





## Regional Environmental Scan

### GEOGRAPHIC, SOCIAL AND ECONOMIC FACTORS

Prairie North Health Region covers a large and geographically diverse area in the northwest part of central Saskatchewan. Key industries are agriculture and related service sectors in the south; oil and gas in the west and central parts of the Region; and forestry, tourism and recreation in the north.

Economically, the western part of Prairie North, especially around Lloydminster, is vibrant and growing, with significant oil and gas exploration and development. The northern section around Meadow Lake is bustling with activity in forestry and related industries. The southern and eastern parts of the Health Region are primarily agricultural and service industry based. The central areas of the Region abound with a combination of these activities.

Prairie North is believed to be the single largest employer in the geographic area.

Prairie North is home to Canada's only border city: Lloydminster, Saskatchewan/Alberta. This presents unique considerations and challenges for the management and provision of health services to people living under differing provincial jurisdictions.

Prairie North is the only health region in Saskatchewan that is home to two regional hospitals: Battlefords Union Hospital in North Battleford, and Lloydminster Hospital on the Saskatchewan side of Lloydminster. This too presents special dynamics in balancing priorities and resources to ensure both sites fulfil their potential as regional health centres.

Saskatchewan's only provincial psychiatric rehabilitation hospital – Saskatchewan Hospital North Battleford – is located in Prairie North Health Region. Once The Battlefords single largest employer and known provincially and nationally for its innovation in the provision of mental health services, the institution, its clients and programming continue to occupy a special place of "ownership" in the community's consciousness. SHNB, as it is known, is also home to the province's Forensic Services program.

### Population Demographics

To meet the health needs of our residents now and into the future, we must understand our population demographics. Prairie North's population has grown slightly over the past year, according to Saskatchewan Health Covered Population figures to June 30, 2004. The population is almost evenly divided between males and females. Just under half of all PNHR residents live in the Region's three largest communities of The Battlefords, Lloydminster and Meadow Lake. The remainder reside in rural and First Nation communities.

Prairie North Health Region has the highest percentage (22.87%) of Registered Indian residents among Saskatchewan's 10 "southern" health regions. Only the percentages of the three northern health regions, the population of which is primarily First Nation, are higher. This comparison does not include additional individuals who identify themselves as Aboriginal but who are not Registered Indians. According to Statistics Canada's 2001 Aboriginal Population Profile, the percentage of Prairie North's total Aboriginal population is even higher, at close to 28 per cent.

The population demographic statistics for PNHR do not include the significant population on the Alberta side of Lloydminster but to which Prairie North provides service. According to the most recent data available from East Central Health, Lloydminster Alberta's population as of March 31, 2003 is 15,356. That population is currently believed to be closer to 18,000. Prairie North also provides health services to a large portion of rural Alberta residents surrounding Lloydminster. ECH advises that the catchment area population outside Lloydminster, AB is 19,694 as of March 31, 2003. Additionally, though not quantifiable, Lloydminster has a significant "shadow" population of individuals who work in the community and area during the week but have permanent addresses elsewhere.

Within Prairie North's boundaries are:

| 2 Cities         | 21 Villages                                                 |               | 5 Resort Villages                                                                        | 14 First Nation Communities           | 16 Rural Municipalities                                                            |
|------------------|-------------------------------------------------------------|---------------|------------------------------------------------------------------------------------------|---------------------------------------|------------------------------------------------------------------------------------|
| Lloydminster     |                                                             |               | Aquadeo                                                                                  |                                       | Beaver River                                                                       |
| North Battleford |                                                             |               | Cochin                                                                                   | Flying Dust                           | Britannia                                                                          |
|                  | Denholm                                                     | Mervin        | Greig Lake                                                                               | Island Lake                           | Cut Knife                                                                          |
|                  | Dorintosh                                                   | Neilburg      | Kivimaa-Moonlight Bay                                                                    | Joseph Bighead                        | Eldon                                                                              |
|                  | Edam                                                        | Paradise Hill | Metinota                                                                                 | Little Pine                           | Frenchman Butte                                                                    |
|                  | Glaslyn                                                     | Paynton       |                                                                                          | Makwa Sahgaiehcan                     | Hillsdale                                                                          |
|                  | Goodsoil                                                    | Pierceland    |                                                                                          | Moosomin                              | Loon Lake                                                                          |
|                  | Loon Lake                                                   | Richard       |                                                                                          | Mosquito/Grizzly Bear's Head/Lean Man | Manitou Lake                                                                       |
|                  | Makwa                                                       | Rockhaven     |                                                                                          | Onion Lake                            | Meadow Lake                                                                        |
| 7 Towns          | Marsden                                                     | Ruddell       |                                                                                          | Poundmaker                            | Meota                                                                              |
| Battleford       | Marshall                                                    | Spruce Lake   |                                                                                          | Red Pheasant                          | Mervin                                                                             |
| Cut Knife        | Maymont                                                     | Waseca        |                                                                                          | Saulteaux                             | North Battleford                                                                   |
| Lashburn         | Meota                                                       |               |                                                                                          | Sweetgrass                            | Parkdale                                                                           |
| Maidstone        |                                                             |               |                                                                                          | Thunderchild                          | Paynton                                                                            |
| Meadow Lake      |                                                             |               |                                                                                          | Waterhen Lake                         | Turtle River                                                                       |
| St. Walburg      |                                                             |               |                                                                                          |                                       | Wilton                                                                             |
| Turtleford       |                                                             |               |                                                                                          |                                       |                                                                                    |
|                  | * The Village of Vawn is now part of the RM of Turtle River |               | * As of Jan. 1, 2005 the Resort Village of Sunset View amalgamated with the RM of Mervin |                                       | * PNHR also includes a portion of each of the RMs of Buffalo, Glenside, & Mayfield |



## Key Population Demographics – Prairie North Health Region

| Prairie North Health Region     |        |                          |          | Saskatchewan |                          |          |
|---------------------------------|--------|--------------------------|----------|--------------|--------------------------|----------|
| Total Residents                 |        | % of Sask.<br>Population | % Change |              | % of Sask.<br>Population | % Change |
| 2004                            | 72,032 | 7.08%                    | +2.11%   | 1,018,057    | 100%                     | +1.02%   |
| 2003                            | 70,545 | 7.00%                    | -1.39%   | 1,007,753    | 100%                     | -1.67%   |
| 2002                            | 71,542 | 6.98%                    | -----    | 1,024,827    | 100%                     | -----    |
| Gender                          |        | % of RHA<br>Population   |          |              | % of Sask.<br>Population |          |
| Female 2004                     | 35,662 | 49.51%                   |          | 512,529      | 50.34%                   |          |
| Male 2004                       | 36,370 | 50.49%                   |          | 505,528      | 49.66%                   |          |
| Female 2003                     | 35,007 | 49.62%                   |          | 508,277      | 50.44%                   |          |
| Male 2003                       | 35,539 | 50.38%                   |          | 499,476      | 49.56%                   |          |
| Female 2002                     | 35,363 | 49.43%                   |          | 515,142      | 50.27%                   |          |
| Male 2002                       | 36,279 | 50.57%                   |          | 509,685      | 49.73%                   |          |
| Residency                       |        |                          |          |              |                          |          |
| Urban 2004                      | 35,396 | 49.14%                   |          | 567,337      | 55.73%                   |          |
| Rural 2004                      | 24,591 | 34.15%                   |          | 404,933      | 39.77%                   |          |
| FN 2004                         | 12,045 | 16.72%                   |          | 45,787       | 4.50%                    |          |
| Urban 2003                      | 34,433 | 48.81%                   |          | 557,763      | 55.35%                   |          |
| Rural 2003                      | 24,507 | 34.74%                   |          | 404,675      | 40.15%                   |          |
| FN 2003                         | 11,606 | 16.45%                   |          | 45,315       | 4.50%                    |          |
| Urban 2002                      | 35,424 | 49.51%                   |          | 561,870      | 54.83%                   |          |
| Rural 2002                      | 25,109 | 35.10%                   |          | 418,885      | 40.87%                   |          |
| FN 2002                         | 11,009 | 15.39%                   |          | 44,072       | 4.30%                    |          |
| Registered Indian<br>Population |        |                          |          |              |                          |          |
| 2004                            | 16,476 | 22.87%                   |          | 100,514      | 9.87%                    |          |
| 2003                            | 15,820 | 22.43%                   |          | 97,256       | 9.65%                    |          |
| 2002                            | 17,205 | 24.04%                   |          | 96,752       | 9.44%                    |          |

Source: Saskatchewan Health Covered Population 2004, 2003 &amp; 2002

## **Emerging Health Issues**

### **West Nile Virus**

The summer of 2004 was a very quiet West Nile Virus (WNV) season following the large outbreak in 2003 in Saskatchewan and Alberta. Only five WNV infections were confirmed in 2004 in Saskatchewan, compared to 947 in 2003. Fifteen infections were detected in PNHR in 2003; none in 2004. This may have been due to the natural history of WNV or the unusually cool summer of 2004. A few more years of monitoring this virus will help determine the long term implications for WNV infection. Prairie North remains an active participant in the surveillance and prevention efforts for WNV in this province.

### **MRSA**

Methicillin resistant staphylococcus aureus (MRSA) is an antibiotic resistant organism that has been present in low numbers in Saskatchewan for many years. It was seen primarily in hospitals until about five years ago when new strains of MRSA began to appear in the community. In our province, 'community acquired' MRSA was first detected in the northeast and has moved across the northern parts of Saskatchewan over the past few years. 'Community acquired' MRSA is now commonly seen in PNHR. Extra attention is being placed on infection control and antibiotic prescribing practices to try to control this and other antibiotic resistant organisms in hospital and in the community.

### **Influenza Pandemic Planning**

Planning continues for what most experts believe is an inevitable pandemic of influenza in the near future. All departments within Prairie North Health Region are involved in reviewing and updating their plans and coordinating them with the Regional and provincial plans. PNHR continues to work with companies, community organizations and municipalities to ensure they are aware of the impact a pandemic will have on them and to ensure they are aware of their role in pandemic planning and response. Coordination and cooperation is required to minimize societal disruption during a pandemic.

## **Health Determinants**

Our health is affected by many factors including where we live, the state of our environment, our genetics, our income and education levels, and our relationships with friends and family. Factors such as these have an impact in determining our health and, combined, are significant.

In previous PNHR Annual Reports, we have looked at the education, employment, and income levels for the Region's population, based on the Canada 2001 census. New data will be available following the 2006 census. This year, our report provides information on two additional health determinants as they pertain to Prairie North.





## Housing Affordability

Access to clean, safe housing is a determinant relating to having a healthy environment. As a general rule, households are considered to have affordability problems if more than 30 per cent of household income is spent on housing costs. At that level of spending, it is likely that inadequate funds will be available for other necessities such as food, clothing, and transportation. Housing affordability problems affect renters more than owners.

### Proportion of Renters and Owners Spending 30% or More of Household Income on Shelter Costs

|        | Renters | Owners |
|--------|---------|--------|
| PNHR   | 33.9%   | 11.2%  |
| Sask.  | 38.5%   | 11.5%  |
| Canada | 39.4%   | 16.0%  |

Source: Statistics Canada 2001 Census

As the table suggests, although the affordability of housing in Prairie North Health Region appears better than the provincial or national average, renters in this region still spend a larger portion of their income on housing than is considered affordable. Band housing on Indian reserves was not included in the calculation of housing affordability.

## Life Stress

Another determinant of health is the strength of our social supports – families, friends, colleagues and communities. Higher stress levels may be partly the result of lack of social supports. The following "Life Stress" table shows that across Canada and Saskatchewan the percentage of people who reported having 'some' stress increased from 2001 to 2003, with Saskatchewan showing higher levels in this category than the rest of Canada. However, in Saskatchewan, fewer people reported having 'quite a lot' of stress and more people reported having 'no stress at all' in 2003, compared to 2001.

### Life Stress in Household Population Aged 18 and Over, By Percentage

|        | Not At All |        | Some  |       | Quite A Lot |       |
|--------|------------|--------|-------|-------|-------------|-------|
|        | 2003       | 2001   | 2003  | 2001  | 2003        | 2001  |
| PNHR   | 9.5% *     | 8.8% * | 71.8% | 69.2% | 18.1% *     | 21.0% |
| Men    | 8.7%       | 10.3%  | 69.3% | 65.2% | 21.6%       | 23.1% |
| Women  | 10.3%      | 7.4%   | 74.4% | 73.0% | 14.3%       | 18.9% |
| Sask.  | 9.9%       | 9.3%   | 69.1% | 65.5% | 20.6%       | 25.0% |
| Canada | 11.3%      | 12.8%  | 63.8% | 61.0% | 24.4%       | 26.1% |

\* The categories 'Not At All' for PNHR in 2003 and 2001, and the category 'Quite A Lot' for PNHR in 2003 must be interpreted with caution, as the sample size was too small to provide reliable data.

Source: Statistics Canada 2001 Census

These trends are also seen in Prairie North except when we look specifically at men. The general trend indicates that in the 'quite a lot' category, men report more stress than women do, and from 2001 to 2003, there was a decline in the percentage of men reporting no stress at all.

## **Health Status and Outcome Indicators**

Health Status and Outcome Indicators provide a broad view of the health status of Prairie North's population. Many factors influence a population's health, as identified in the previous section on health determinants. A health region's role in influencing and determining the health status of its population is limited but important. As Prairie North's Vision of "Healthy people in healthy communities" indicates, the Region strives to improve the health of its population. We must monitor and report on health status and outcome measures to help us establish our direction and priorities in meeting our Vision.

Following are the key health status and outcome indicators monitored for Prairie North Health Region to help us identify areas of concern, anticipate health needs, plan for services and programs, and target initiatives to improve the overall health of our population. The data is provided through Saskatchewan Health.

### **Infant Mortality**

Infant mortality rate is among the most widely recognized indicators of the overall health of a population. It reflects not only the level of infant mortality, but also the health status and health care of a population, the effectiveness of preventive care, and the attention paid to maternal and child health. Broader social factors such as maternal education and smoking also impact infant mortality. An infant death serves as a warning of possible deficiencies in the physical and socio-economic environment, nutrition, education, or health of a community. A reduction in the infant death rate requires a multi-faceted approach.

| Infant Mortality Rate<br>Per 1,000 Live Births |                   |           |
|------------------------------------------------|-------------------|-----------|
|                                                | Five Year Average |           |
|                                                | 1998-2002         | 1997-2001 |
| PNHR                                           | 7.15              | 8.1       |
| Sask.                                          | 6.24              | 6.9       |

Source: Saskatchewan Health

The infant mortality rate in Prairie North Health Region and for Saskatchewan as a whole has fallen from the previous five-year period. However, PNHR's rate remains above the provincial average and is third highest among Saskatchewan's 13 health regions.

### **Life Expectancy**

Life expectancy is a widely used indicator of the health of a population. It measures the quantity of life, not the quality. In Canada, life expectancy rates for the population are increasing. Life expectancy is higher for women than for men, and increasing rates of life expectancy have an impact on the proportion of elderly people in the population. First Nations people and residents of northern communities appear to have significantly lower life expectancy than those of southern service areas.





In Prairie North Health Region for 2001, the life expectancy of males at birth has risen from 1997, along with the provincial average, and remains only slightly below the provincial number. For females in Prairie North for 2001 the life expectancy at birth has risen to a lesser extent than it has for males, but remains higher than the life expectancy for males. Provincially, however, the life expectancy at birth for females in PNHR is a full year lower than the Saskatchewan average, and is the lowest among the 10 southern health regions in our province.

At age 65, the life expectancy for both men and women in Prairie North Health Region as of 2001 is below the provincial average and has fallen from 1997 levels. During that interval between 1997 to 2001, the provincial life expectancy for males and females at age 65 has risen. In 1997, females' life expectancy in Prairie North at age 65 was identical to the provincial average, while the life expectancy at age 65 for males in Prairie North exceeded the provincial average.

**Life Expectancy At Birth and At Age 65 Years**

|       | At Birth (2001 Statistics) |            | At Birth (1997 Statistics) |            | At Age 65 Years (2001) |            | At Age 65 Years (1997) |            |
|-------|----------------------------|------------|----------------------------|------------|------------------------|------------|------------------------|------------|
|       | Males                      | Females    | Males                      | Females    | Males                  | Females    | Males                  | Females    |
| PNHR  | 76.0 years                 | 80.8 years | 74.5 years                 | 80.6 years | 16.8 years             | 20.0 years | 17.1 years             | 20.7 years |
| Sask. | 76.2 years                 | 81.8 years | 75.6 years                 | 81.4 years | 16.9 years             | 20.9 years | 16.6 years             | 20.7 years |

Source: Saskatchewan Health

### Overweight and Obesity

Obesity has been identified as a major risk factor contributing to a number of chronic illnesses such as type II diabetes and heart disease. Body Mass Index (BMI) is the most common method of determining if an individual's weight is in a healthy range. BMI is calculated as an individual's weight in kilograms divided by height in metres squared. The current standard for an individual to be considered overweight is a BMI of 25 to 29.9. The standard for obesity is a BMI of 30 and over. Reducing the risk of obesity decreases the risk of a number of chronic conditions such as cardiovascular disease, type II diabetes, and certain types of cancer.

**Percentage of Population (Age 18 – 64 Years)**

**Who Are Overweight or Obese**

|       | Overweight<br>(2003) | Overweight<br>(2001)<br>(Ages 20-64) | Obese<br>(2003) | Obese<br>(2001)<br>(Ages 20-64) |
|-------|----------------------|--------------------------------------|-----------------|---------------------------------|
|       |                      |                                      |                 |                                 |
| PNHR  | 39.1%                | 30.2%                                | 24.9%           | 21.3%                           |
| Sask. | 35.8%                | 34.0%                                | 20.5%           | 19.7%                           |

Source: Saskatchewan Health

In Prairie North Health Region, the percentage of overweight and obese people is above the provincial rate.

## Physical Activity

Maintaining physical activity is associated with a range of health benefits including improved heart health and mental health, and reduced risk of obesity and diabetes. Increased participation in physical activity is associated with a reduced incidence of high-risk behaviours such as smoking, alcohol and substance abuse, and inadequate dietary practices among teenagers and youth in general. Inactivity is a major risk factor for heart disease. Physical activity tends to decrease with age.

Percentage of Population Age 12 and Over Reporting  
Physical Activity Participation Levels

|        | Active / Moderately Active |       | Inactive |       |
|--------|----------------------------|-------|----------|-------|
|        | 2003                       | 2001  | 2003     | 2001  |
| PNHR   | 52.4%                      | 39.3% | 45.5%    | 48.2% |
| Sask.  | 49.8%                      | 44.1% | 47.8%    | 48.9% |
| Canada | 50.8%                      | 42.6% | 46.8%    | 49.1% |

Source: Saskatchewan Health

In Prairie North Health Region, over half the population reports itself as active or moderately active – a considerable improvement over 2001 levels, and higher than the provincial and national levels for 2003. Conversely, fewer residents in PNHR, Saskatchewan and Canada identify themselves as inactive compared to 2001 levels. Prairie North's level of inactivity is lower than the provincial and national figures

## Smoking

Tobacco use is the leading cause of preventable illness and death in Canada. Health Canada estimates that smoking is responsible for more than 45,000 deaths per year. It is also estimated that approximately eight out of every 10 people who try smoking become habitual smokers. Teenaged girls are now more likely to smoke than adolescent boys. If the increased rates of smoking among young women are not reversed, lung cancer rates among women will continue to climb. Smoking is a significant risk factor for heart disease and stroke, as well as respiratory diseases such as asthma. Exposure to environmental tobacco smoke increases the likelihood of lung cancer and respiratory diseases in non-smokers.

Percentage of Population Age 12 Years and Over  
Who Are Current, Daily or Occasional Smokers

|        | Total Rate 2003 |         | Total Rate 2001 |         |
|--------|-----------------|---------|-----------------|---------|
|        | Males           | Females | Males           | Females |
| PNHR   | 24.5%           | 26.7%   | 37.7%           | 28.6%   |
| Sask.  | 24.6%           | 23.1%   | 27.9%           | 27.3%   |
| Canada | 24.8%           | 21.0%   | 28.0%           | 23.8%   |

Source: Saskatchewan Health

Smoking rates among males in Prairie North Health Region have fallen sharply since 2001, and are now on par with the provincial and national average of just under one-quarter of males being smokers. The smoking rate for females in Prairie North is slightly higher than for males in PNHR, and is higher than both the provincial and national numbers for females. Nevertheless, the percentage of females smoking in PNHR has fallen from its 2001 level.



### Self-Rated Health Status

Self-reported health is a general indicator of the overall health status of individuals. It is collected using a five-point reporting scale, ranging from excellent to poor. Self-reported health tends to be influenced by age. Increasing age tends to lead to consideration of one's health as less than very good or excellent. Men are more inclined to report a more positive assessment of their health status. Major cultural differences may also come into play, with some cultures focusing their assessment exclusively on physical health and others adopting a more comprehensive definition to include mental and spiritual well-being. Depression has been associated with reduced odds of reporting excellent or very good health, especially in women.

**Self-Rated Health Status: Percentage of Population  
Age 12 Years and Over Who Report Their Health  
as Very Good or Excellent**

|        | Very Good |       | Excellent |       |
|--------|-----------|-------|-----------|-------|
|        | 2003      | 2001  | 2003      | 2001  |
| PNHR   | 39.3%     | 34.5% | 22.5%     | 19.7% |
| Sask.  | 38.6%     | 36.3% | 20.8%     | 20.5% |
| Canada | 36.3%     | 35.8% | 22.3%     | 25.6% |

Source: Saskatchewan Health

Nearly 62 per cent of Prairie North Health Region residents rate their health as either very good or excellent. That's a significant improvement over the 54 per cent rate in 2001, and is above the Saskatchewan and Canadian levels. Province-wide, PNHR continues to rank among the top four health regions in terms of how we view our overall health.

### Diabetes Prevalence Rate

Diabetes is a progressively debilitating disease associated with several other chronic disease complications and death. Incidence and prevalence of diabetes tends to increase with age. Individuals with long-standing obesity are at high risk of developing diabetes. First Nations and non-Caucasian individuals have a higher risk of type II diabetes than Caucasians. The risk is reversed in type I diabetes. Diabetes carries high utilization costs, as well as quality of life implications.

**Age-Adjusted Diabetes Prevalence Rate per 1,000 Population**

|       | Age-Adjusted Rate |           | Crude Prevalence Rate |           |
|-------|-------------------|-----------|-----------------------|-----------|
|       | 2001/2002         | 2000/2001 | 2001/2002             | 2000/2001 |
| PNHR  | 44.3              | 45.1      | 34.7                  | 40.5      |
| Sask. | N/A               | N/A       | 40.0                  | 40.2      |

Source: Saskatchewan Health

Prevalence rates indicate the number of individuals per 1,000 people who have a certain condition. The crude diabetes prevalence rate includes all cases per 1,000 population for a specific period. The age-adjusted rate takes into account differences in age

distributions between Saskatchewan's 13 health regions. Prairie North's age-adjusted diabetes prevalence rate remains third highest in the province.

## Injury Hospitalization Rates

Injury is the leading cause of childhood death in Canada, and is a leading cause of hospitalizations among Saskatchewan children. According to the Canadian Institute of Child Health, Saskatchewan had the highest provincial rate of hospitalizations in 1996 due to injury for children and youth ages 0 to 19 years. Population health strategies have shown that injury prevention is possible, if it focuses on the risk factors involved. For example, targeting rural areas for increased awareness regarding farm injury can help reduce those injuries. Injury to children and youth can result in life-long disabilities, or even death. Children and youth living in Northern Saskatchewan have higher rates of injury compared to the rest of Saskatchewan.

| Injury Hospitalization Rate per 1,000 Population<br>Ages 0 to 19 Years |           |           |           |           |
|------------------------------------------------------------------------|-----------|-----------|-----------|-----------|
|                                                                        | Females   |           | Males     |           |
|                                                                        | 2002/2003 | 2000/2001 | 2002/2003 | 2000/2001 |
| PNHR                                                                   | 6.3       | 6.0       | 8.7       | 7.4       |
| Sask.                                                                  | 6.5       | 6.6       | 9.3       | 10.2      |

Source: Saskatchewan Health

Prairie North Health Region's injury hospitalization rate for children and youth has risen, compared to the previous reporting period, but remains below the provincial average for both females and males. The provincial and PNHR injury hospitalization rate for boys remains higher than that for girls.

## Resources and Risks

### Resources

Prairie North Health Region employs over 2,600 staff in full, part-time and casual positions. This includes 541 registered nurses, 1,841 unionized support staff, 158 Health Sciences professional staff, and 148 non-unionized staff, all as of March 31, 2005. Translated into full-time equivalent positions, the staff complement is as follows:

| Full-Time Equivalent Positions – Prairie North Health Region |                                     |                                     |
|--------------------------------------------------------------|-------------------------------------|-------------------------------------|
|                                                              | 2004/2005<br>(As At March 31, 2005) | 2003/2004<br>(As At March 31, 2004) |
| Canadian Union of Public Employees (CUPE - Sask.)            | 1,165.39                            | 1,143.36                            |
| (CUPE - Alberta)                                             | 88.75                               | 88.63                               |
| Health Sciences Association of Saskatchewan (HSAS)           | 112.34                              | 114.81                              |
| Out-of-Scope (OOS)                                           | 126.55                              | 128.13                              |
| Saskatchewan Union of Nurses (SUN)                           | 378.75                              | 378.78                              |
| United Nurses of Alberta (UNA)                               | 13.51                               | 13.65                               |
| <b>TOTAL Full-time Equivalents</b>                           | <b>1,885.29</b>                     | <b>1,867.36</b>                     |

Source: Saskatchewan Health & PNHR Payroll





Approximately 100 physicians provide service in the Region, including family physicians and resident specialists in anaesthesia, general surgery, internal medicine, obstetrics/gynaecology, ophthalmology, pathology, public health, radiology, and psychiatry. The Region is also served by a number of visiting specialists, providing service in gerontology, dermatology, orthopaedics, pediatrics, and nephrology.

Prairie North Health Region provides a continuum of health services through prevention, treatment, and rehabilitation, to long-term care services and programs, and palliation. The Region is home to:

#### Prairie North Health Region Facilities

|                                                      | Facility                                         | Location         |
|------------------------------------------------------|--------------------------------------------------|------------------|
| Two Regional Hospitals                               | Battlefords Union Hospital                       | North Battleford |
|                                                      | Lloydminster Hospital                            | Lloydminster, SK |
| One District Hospital                                | Northwest Health Facility (Meadow Lake Hospital) | Meadow Lake      |
| One Community Hospital                               | Maidstone Union Hospital                         | Maidstone        |
| One Hospital with an Attached Special Care Home      | Loon Lake Hospital & Special Care Home           | Loon Lake        |
| One Provincial Psychiatric Rehabilitation Hospital   | Saskatchewan Hospital                            | North Battleford |
| Two Health Centres                                   | Manitou Health Centre                            | Neilburg         |
|                                                      | Paradise Hill Health Centre                      | Paradise Hill    |
| Five Health Centres with Attached Special Care Homes | Cut Knife Health Complex                         | Cut Knife        |
|                                                      | Lady Minto Health Care Center                    | Edam             |
|                                                      | L. Gervais Memorial Health Centre                | Goodsoil         |
|                                                      | St. Walburg Health Complex                       | St. Walburg      |
|                                                      | Riverside Health Complex                         | Turtleford       |
| Seven Special Care Homes                             | Battlefords District Care Centre                 | Battleford       |
|                                                      | Jubilee Home                                     | Lloydminster     |
|                                                      | Northland Pioneers Lodge                         | Meadow Lake      |
|                                                      | Dr. Cooke Extended Care Centre                   | Lloydminster, AB |
|                                                      | Pine Island Lodge                                | Maidstone        |
|                                                      | River Heights Lodge                              | North Battleford |
|                                                      | Villa Pascal (Affiliate)                         | North Battleford |

Prairie North Health Region also offers a broad range of health services including:

|                                    |                                       |                                  |
|------------------------------------|---------------------------------------|----------------------------------|
| Addictions Services                | Child and Youth Services              | Community Development Services   |
| Community/Public Health Nursing    | Dental Health Education               | Early Childhood Psychology       |
| Emergency Medical Services         | Health Promotion/Disease Prevention   | Home Care                        |
| Medical Health Office              | Mental Health Services                | Podiatry                         |
| Primary Health Care Services       | Psychiatric Rehabilitation            | Psychiatry                       |
| Public Health Inspection           | Public Health Nutrition Services      | Speech and Language Pathology    |
| Successful Mothers Support Program | Therapies and Rehabilitation Services | Volunteer and Spiritual Services |
| KidsFirst                          |                                       |                                  |

### **Risks – Imperatives for Change**

#### Health Human Resources

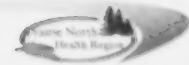
Recruitment and retention of health care professionals poses a significant challenge for Prairie North Health Region, as it does for health service organizations provincially, nationally, and internationally. Shortages in key professional groups including doctors, nurses, pharmacists, speech language pathologists, physiotherapists, and psychologists, to name a few, negatively impact PNHR's ability to meet public demands for appropriate, quality care and service.

The availability – or lack – of health care professionals, particularly in our rural communities, constitutes the single most significant factor driving the process of change in Prairie North Health Region. Particularly in our rural sites, the availability of physicians and nurses will determine the type, location and level of services to be provided. Prairie North has faced significant challenges in the past year retaining and recruiting physicians to serve rural communities. The maintenance of 24-hour Registered Nurse (RN) coverage has also been difficult.

To mitigate these risks, Prairie North has worked to maximize use of available nursing resources and utilize RNs and Licensed Practical Nurses (LPNs) to their full scope-of-practice. Prairie North has expanded its Nurse Practitioner program, and has met with community leaders and the public in several towns and villages to introduce the concept of Primary Health Care services. PNHR officials have met with rural community leaders to promote and encourage the development of group physician practices, rather than solo physician sites. Prairie North has consolidated access to after-hours emergency physician services in select rural locations, facilitating the consistent availability of 24-hour emergency coverage in designated sites.

Emphasis remains on the ongoing recruitment of health care professionals provincially, nationally and internationally. Some success has been achieved in recruiting international nurses to Prairie North's larger sites. Difficulties remain in recruiting professionals to rural areas. Attracting managers to rural areas is likewise challenging. Prairie North is working to address this through ongoing training, education, and mentoring opportunities, as well as strengthening regional linkage and consultation services to rural staff and managers especially in the area of support services.





### Declining Utilization of Rural Facilities

Commensurate with the challenges of retaining and recruiting health care professionals to rural sites is declining utilization of some rural facilities. The risk is primarily two-fold: it is difficult for staff to maintain their skill levels and professional competencies; and it is an inefficient use of Prairie North's limited health care dollars.

To mitigate this risk, Prairie North implemented change at two of its rural health sites. Paradise Hill Hospital was converted to a health centre, and nursing services at Manitou Health Centre in Neilburg were eliminated. Displaced staff who chose to continue working in the Region secured employment elsewhere in Prairie North. Costs for operating the Paradise Hill and Neilburg facilities were reduced. Patient access patterns continued to evolve toward the larger centres, where client access was already increasing.

Additionally, PNHR improved its collection and analysis of facility and program utilization data throughout the Region with establishment of a Performance Measurement Unit to monitor utilization of resources at all sites.

### Finances

Prairie North Health Region continues to face significant financial challenges, primarily due to rapidly escalating costs. Expenditures are growing at a rate of six per cent to seven per cent annually. Major cost drivers are salaries and benefits of health care providers and physicians, skyrocketing drug costs, increased use of high-cost procedures and expensive medical technologies, and growing rates of chronic diseases including diabetes, cancer, and cardiovascular disease.

While provincial funding increases to health are generous compared to other government-funded departments, these increases cannot keep pace with health regions' financial pressures. This situation holds true nation-wide.

To manage its financial risks, Prairie North continues to seek opportunities such as group purchasing, standardizing clinical approaches and practices, minimizing duplication and excessive inventories, and improving work flows and processes, to maximize operational efficiencies and cost-effectiveness. PNHR is working to reduce overtime, sick time, and other costs associated with staff scheduling and replacement. Prairie North has made changes in the past year to two of its rural facilities, thereby reducing costs. Changes to psychogeriatric programming at Saskatchewan Hospital have reduced costs and resulted in closure of the unit and redeployment of staff.

In relation to chronic disease, Prairie North has developed and implemented its Population Health Promotion Plan, Primary Health Care Plan and Diabetes Plan. An overall Chronic Disease Management Strategy is being developed.

Prairie North's overall financial risk is also tied to appropriate funding from the Province of Alberta through East Central Health Region, for the provision of service at Lloydminster. Prairie North works very closely with ECH to ensure that the health needs and resulting costs for service to Alberta residents are understood and appropriately funded. PNHR has been successful in its efforts to secure increased resources from its Alberta counterpart.

### Capital Infrastructure

Prairie North Health Region is faced with significant inherent structural problems that are behind much of our financial and staffing pressures. The Region is home to several aging, inefficient, and expensive facilities that are costly to maintain and do not allow efficient, cost-effective use of staff and other resources.

To address its infrastructure deficiencies, PNHR has developed a Five-Year Capital Management Plan that identifies priorities and sets forth timetables to address project needs. Specifically, Prairie North is working on replacement of Pine Island Lodge in Maidstone and rejuvenation of Maidstone Hospital into the single Maidstone Integrated Facility. With Department of Health approval in 2003-04, preliminary planning was underway in 2004-05, with the target of being granted approval to move toward construction in 2005-06. The project will consolidate all Maidstone health services at a single site thereby improving integration and access. It will capitalize on usage of available health human resources.

In Lloydminster, expansion of the now PNHR-owned Home Care building was completed in 2004-05, with phase two renovation of the structure to accommodate relocation of Community Health Services to a single site. The initiative resolves space and service issues at the soon-to-be vacated rental site occupied by Community Health programs.

The past year has seen development of a plan for major renovation and expansion of Lloydminster Hospital to correct a number of building deficiencies, facilitate introduction of Computerized Tomography (CT) service in Lloydminster, and to provide for expansion to meet the growing needs of a rapidly increasing population.

In The Battlefords, a multi-year plan is being developed to address significant deficiencies at Battlefords Union Hospital, including sprinkler and energy efficiency upgrades, and to address operational inefficiencies.

Processes have been initiated to begin planning for replacement of Saskatchewan Hospital North Battleford, Prairie North's oldest and largest facility. A report commissioned by the building's owner Saskatchewan Property Management Corporation (SPMC) has recommended replacement of the 90-year-old facility with a new structure that more appropriately meets current and future programming requirements. Locally, consideration is being given to the need to replace Battlefords District Care Centre (BDCC) which itself is 65-years-old and was originally part of the Saskatchewan Hospital complex. BDCC is currently a long-term care facility which is in need of rejuvenation or replacement.

In Meadow Lake, prior plans for rejuvenation of Northland Pioneers Lodge are being reviewed. These plans recommend a phased-in approach to upgrading of the facility.



### Capital Equipment

Keeping pace with the ongoing needs for new or replacement technology and equipment poses a constant challenge for Prairie North Health Region. In particular, the Region faces a priority need to replace outdated laboratory and radiology equipment at virtually all of its service sites. PNHR has few capital dollars to meet this demand, let alone the continual requirement to repair and replace basic necessary pieces of equipment.

To deal with this risk, Prairie North has established a Capital Equipment Plan to manage capital equipment purchases on a systematic and sustainable basis. Additionally, operational reviews of programs and facilities will impact the future delivery of services, as well as equipment replacement and finances.

The Region continues to partner with the Lloydminster Region Health Foundation and Battlefords Union Hospital Foundation to meet many capital equipment needs at Lloydminster facilities and BUH. The Twin Rivers Health Foundation and numerous Auxiliaries and community groups are instrumental in supporting capital equipment needs for other urban sites and for rural facilities/programs.

### Mitigating Risks - Federal Health Accord Funding and Saskatchewan Health

Prairie North Health Region, and all Saskatchewan health regions, benefited greatly in 2004-05 from Saskatchewan Health's decision to focus its \$66 million in incremental federal funding for this fiscal year on improving patient access to quality services. By far the bulk of these dollars went directly to RHAs to focus on key areas of risk and need, including infrastructure upgrades, safer workplaces, equipping surgical sites, upgrading and replacing diagnostic imaging equipment, patient care equipment, Telehealth expansion, and health human resource initiatives.

|                                                                                            |                       |
|--------------------------------------------------------------------------------------------|-----------------------|
| Infrastructure Upgrades                                                                    | \$590,000             |
| Patient Care Equipment and Safer Workplaces                                                | \$860,000             |
| Equipping Surgical Suites<br>(in Lloydminster and North Battleford)                        | \$580,000             |
| Health Human Resource Initiatives<br>(for Quality Workplaces and Professional Development) | \$131,000             |
| Diagnostic Imaging Upgrades and Replacement<br>(in Lloydminster and North Battleford)      | \$530,000             |
| CT Scanner Purchase<br>(in Lloydminster and North Battleford)                              | \$1.5 million         |
| <b>TOTAL Sask Health/Federal Funding to PNHR</b>                                           | <b>\$4.19 MILLION</b> |

These unanticipated financial contributions have assisted us greatly in managing our risks. Particularly in the area of Health Human Resources, the investment and emphasis on improving the health of our work places is anticipated to produce significant results in the longer term. Prairie North Health Region applauds the province's decision to direct these federal dollars specifically to the regional level.

## Major Initiatives and Accomplishments

The past year has been an extremely busy one for all Board members, managers, staff, physicians, partners, affiliates, colleagues, and volunteers of Prairie North Health Region. The year was one of managing imperatives for change, while continuing to meet day-to-day demands for care and service of our patients and clients. Credit is due to everyone who accepts and fulfills these challenges to the best of their abilities. Together with our employees and colleagues, Prairie North Health Region remains focused on our Vision, and on the broad, long-term goals to which Saskatchewan's health system aspires.

Following are some of the highlights of the past year's activities. These by no means represent all of the initiatives underway or completed within our facilities and programs.

### GOAL 1: IMPROVED ACCESS TO QUALITY HEALTH SERVICES

#### **Specialist Physician Services**

The variety of visiting physician services to Meadow Lake was expanded to include Ophthalmology. Core specialties were enhanced in Prairie North's two regional centres, with expansion of Internal Medicine service at Lloydminster and return of resident Ear, Nose and Throat (ENT) service in The Battlefords. The services of a visiting Geriatric specialist were provided to Maidstone.

#### **Primary Health Care**

Primary Health Care services were expanded to Goodsoil, with recruitment of a Primary Health Care physician and a Nurse Practitioner to work in conjunction with other health care professionals under a primary health care model. The Goodsoil site is a satellite of the existing Primary Health Care site at Loon Lake. Prairie North also implemented a Primary Health Care Team Facilitator position to provide support to Primary Health Care Teams in the Region.

#### **Computerized Tomography (CT)**

The groundwork has been laid for implementation of CT service at both Regional hospitals in Prairie North. Funding is in place and firm targets have been established for launch of the service in September 2005. In conjunction with preparations for CT, functional planning for redevelopment of Lloydminster Hospital moved forward. A five-year plan has been established, with phase one work in its early stages to accommodate CT. Preliminary work is underway to establish a five-year rejuvenation plan for Battlefords Union Hospital. The first stage will focus on CT.

#### **Long-Term Care**

Collaboration with East Central Health, AB and the community of Lloydminster is progressing toward rejuvenation of Dr. Cooke Extended Care Centre in Lloydminster. The project will see enhancement of 55 long-term care beds to 60 new beds, and development of supportive housing to accommodate at least 40 residents.





### **Single Point of Entry**

The Single Point of Entry process for access to Continuing Care services in Prairie North has now been fully implemented. The process is based on best practice and is used province-wide. It identifies people at risk and attempts to use all available resources to meet the needs of Continuing Care clients and their families.

### **Home Care Building - Lloydminster**

Phase one redevelopment of the Home Care building in Lloydminster is complete. The building, which was purchased by Prairie North in the 2003-04 fiscal year, has been expanded and Home Care staff have moved into this addition. Phase two renovation of the older part of the building is underway. Once complete in 2005-06, this space will house Community Services currently located in rental space in downtown Lloydminster. The project will result in access to all Lloydminster community services at one site to be known as the Community Health Services building.

### **Saskatchewan Hospital**

The wheels are in motion for the eventual replacement and redevelopment of Saskatchewan Hospital. An SPMC study which included program and space reviews with Prairie North Health Region, recommends action on the facility to meet current and future programming requirements. The multi-million dollar project is believed to be on the province's planning horizon.

### **Category 'A' Physician Service**

Prairie North was successful in achieving Category 'A' physician on-call status at Maidstone and Turtleford. The designation provides additional financial support for the service at Maidstone. For Turtleford, the designation consolidates emergency physician services for the town and surrounding communities at Riverside Health Complex in Turtleford. Residents of the area now have consistent, constant access to emergency physician services at a single location. The initiative maximizes the use of limited emergency health human resources at a single site.

## **GOAL 2: EFFECTIVE HEALTH PROMOTION AND DISEASE PREVENTION**

### **Restructuring of Resources**

Prairie North's Community/Public Health Services has been restructured to strengthen resources and expertise in delivering on population health goals and agendas. The service now functions as the Population Health Unit, with specific direction in environmental protection, public health services, and rehabilitation services.

### **Chronic Disease Management**

Emphasis on Chronic Disease Management has resulted in regional consistency for diabetes education, and greater support for clients, families, and front-line staff in understanding, managing, and coping with diabetes. Planning is underway on a regional strategy for coronary heart disease.

### **Tobacco Control Act**

Public Health Inspectors in Prairie North and all other Saskatchewan health regions were instrumental in implementation of the province's new *Tobacco Control Act* (TCA). In partnership with Saskatchewan Health, significant preparation, along with public education and awareness of the new legislation, was achieved. Compliance across Prairie North Health Region was generally good, despite the challenges faced under differing jurisdictions. Public Health Inspectors are commended for their commitment to monitoring and enforcement of compliance with *the Act* in Prairie North Health Region.

### **Community Development**

Support for and participation in the KidsFirst program continues to grow, with greater numbers of families being served under the program in The Battlefords and Meadow Lake. Implementation of the Shared Care model for mental health services in Lloydminster has been a success. Feedback has been positive and requests have been received for expansion of the model to include other communities in Prairie North. Expansion of the In Motion program continues in numerous Prairie North communities. The PNRHA Board has formally declared Prairie North an "In Motion" health region.

### **Pandemic and Emergency Preparedness Planning**

Significant progress was made in 2004-05 toward completion of pandemic and emergency preparedness strategies for Prairie North. Local pandemic planning coincides with provincial and national initiatives. Progress is being made on linking health region pandemic and emergency planning with that of communities and areas.

## **GOAL 3: RETAIN, RECRUIT AND TRAIN HEALTH PROVIDERS**

### **Representative Workforce**

Prairie North has established a Representative Workforce program to better reflect the Region's overall population and expand the pool of potential employees to meet current and future needs of the workplace. A Representative Workforce Coordinator has been hired to move the program forward. Additionally, Prairie North continues its collaboration with the Canadian Union of Public Employees and has seen approximately 700 staff members participate in Aboriginal Awareness Training.

### **Healthy Workplaces**

Regional Occupational Health & Safety Policies have been completed and are being implemented. Staff training about the policies is underway. Prairie North developed plans for provincial funding to identify and address ergonomic issues in the workplace. A second application for funding was prepared and submitted to provide leadership education and training for managers. Workplace wellness committees are up and running in many PNRH sites. Employee long-service recognition programs were reviewed and continue to be supported.





### **Staff Training and Education**

Prairie North strengthened its staff education and training by hiring a Staff Education Coordinator to manage mandatory training requirements such as Advanced Cardiac Life Support (ACLS) and Professional Assault Response Training (PART). The coordinator facilitates education and training around Transfers, Lifts and Repositioning (TLR) and Occupational Health and Safety initiatives. Emphasis is on 'training the trainer' and providing internal opportunities for education and training. Telehealth has become an ever-more valuable tool in the training regime. Numerous staff, physician, and client educational sessions have been held via Telehealth and accessed through the three Telehealth locations in PNHR. Staff have benefited from increased availability to computer training through expansion of computer labs and training programs to Lloydminster, Meadow Lake, and Turtleford.

### **Central Scheduling**

Modifications have been made to the Employee Scheduling Program in The Battlefords to improve staff utilization. Preparations are underway to expand the modified program to additional sites in Prairie North.

### **Physician Relationships**

Significant efforts were expended over the past year to strengthen dialogue and relationships with and between physicians. Much progress has been achieved as evidenced by restructuring of medical committees and the medical staff organization in Lloydminster. The Region has worked to strengthen collaboration between physicians in rural and urban communities to enhance working relationships, and care and service to clients.

Prairie North successfully facilitated partnership between 14 communities and rural municipalities in the Turtleford area to create the North Saskatchewan River Municipal Health Holdings organization. The fledgling agency supports and encourages the establishment of group physician practice at Turtleford to assist in recruitment and retention of physicians to the rural site. Prairie North believes the municipal health holdings model, based on the original organization at Maidstone, is the pattern for the future of physician recruitment and retention in rural communities.

## **GOAL 4: A SUSTAINABLE, EFFICIENT, ACCOUNTABLE AND QUALITY HEALTH SYSTEM**

### **Accreditation**

Prairie North Health Region underwent its first Region-wide Accreditation survey in October 2004. Thirteen Accreditation teams comprised of staff throughout the Region identified their areas of strength and their areas for improvement to discuss with the surveyors during a week of interviews and assessment. The surveyors completed and provided their report in early December 2004. Prairie North was granted Accreditation with Report and Focused Visit. Congratulations to everyone who participated in the process!

### **Client Satisfaction**

PNHR participated in a province-wide acute care Patient Experience Survey through the provincial Health Quality Council (HQC). Evaluation and results of the survey will be shared with the HQC, Saskatchewan Health, and Health Regions in 2005-06, with the aim of future and ongoing improvements in the delivery of acute care service.

### **Balanced Budget**

For the second consecutive year, PNHR projected and delivered a balanced budget. Change options delineated in the budget plan to help reduce costs and improve resource utilization were successfully implemented in Paradise Hill and Neiburg. Changes at Saskatchewan Hospital lead to the realignment of staffing and subsequent reduction in overtime costs. Additionally, expenditures were closely monitored and controlled through the end of the fiscal year.

### **Information Technology and Management**

Prairie North successfully implemented a number of Information Management systems including the Procura Home Care information system in Meadow Lake, the Laboratory Information System in North Battleford, and the Admission Discharge Transfer (ADT) system at Battlefords Union Hospital. Access to computers along with related training was expanded throughout the Region. PNHR moved into use of the Saskatchewan Health Information Network (SHIN) Help Desk to improve the management and response to computer system assistance requests and inquiries.

### **Health Quality Initiatives**

Prairie North participated in other initiatives of the Health Quality Council, including the study of Drug Management of Saskatchewan Seniors in Long-Term Care, and the study on Cardiac Care in Saskatchewan. The aim of each is to improve the quality of care for clients. At the local level, PNHR implemented a Regional Wound Management Protocol and completed education around its use for front-line staff in acute, long-term, and home care.

### **Performance Measurement**

Prairie North established a Performance Measurement function to improve the collection, compilation, analysis, reporting and use of data throughout the Region. Sound and reliable data that is shared and usable is essential in sustaining an efficient, accountable health system.

### **Energy Efficiency**

Prairie North is a leader in movement toward increased energy efficiency. PNHR is involved in two federal energy efficiency programs. The first commits that all new PNHR construction is built to Canadian Building Incentives Program (CBIP) standards for energy efficiency. The second is the Energy Innovators Program which supports energy efficiency studies of existing facilities and provides recommendations for improvements. Studies have been done of Battlefords Union Hospital, Lloydminster Hospital, and Northwest Health Facility in Meadow Lake. Energy saving initiatives are being incorporated into projects for Battlefords and Lloydminster Hospitals to accommodate CT service. Under the Energy Innovators Initiative, PNHR has received recognition from Natural Resources Canada's Office of Energy Efficiency for the Region's "commitment to energy efficiency and reducing greenhouse gas emissions that contribute to climate change."





## Progress and Results

Each year, Prairie North Regional Health Authority and Saskatchewan Health enter into an Accountability agreement that sets out the key health system expectations and measures for the RHA for the operating year. The Accountability Document, as it is known, reflects the Region's and the Health Department's mutual understanding of planned service delivery and expenditures for each of the RHA's program areas.

The following reports on Prairie North's progress and results in achieving these expectations. A series of standard indicators has been developed provincially to provide concrete measures that are comparable for Regions across the Saskatchewan health system. A complete listing of all of these indicators is highlighted in the Performance Management Summary section of this report.

Prairie North Regional Health Authority's ability to achieve each of its expectations is influenced by a number of key drivers. They are health human resources, finances, and infrastructure.

Recruitment and retention of physicians, nurses, and other health care professionals in rural communities especially will dictate the pace and process of change. In the past year, inability to recruit and retain physicians to the Edam, St. Walburg, Loon Lake, and Goodsoil areas of our Region resulted in realignment of services – especially physician on-call, after hours, and emergency services – at these sites. The situation impacted our ability to fully implement and maintain Goodsoil as a Primary Health Care Site. Shortages of nurses also negatively impacted our ability to significantly reduce overtime costs throughout the Region.

Prairie North's current and future financial position impacts our ability to maintain programs, services, and facilities. To achieve a balanced budget for 2004-05, PNHR implemented change options at Paradise Hill, Neilburg, and Saskatchewan Hospital North Battleford. How quickly and successfully these changes could be enacted would impact our ability to achieve a balanced budget. PNHR was successful in achieving its targets and reducing costs.

PNHR's financial picture is fundamentally tied to the funding it receives through East Central Health, AB to provide service to its residents in and around Lloydminster. The demands for service at Lloydminster continue to skyrocket as population numbers explode on the Alberta side of the Border City. Services and facilities must be expanded and improved to meet these demands. PNHR's success in doing so depends on strong, continued support from ECH. The Alberta health region provided significant additional dollars for programs and services in 2004-05.

Prairie North Health Region has begun to address its significant inherent structural problems including aging, inefficient and expensive facilities that are costly to maintain and do not allow efficient, cost-effective use of staff resources. The physical state of these facilities requires ongoing commitment to maintenance and upgrading, if not total rejuvenation or replacement. Unanticipated problems that require urgent attention and dollars, or changes in funding commitments from other sources, can negatively impact our ability to move forward with projects as planned.

Prairie North holds mortgages on several of its long-term care facilities, and on purchase, renovation and expansion of the Home Care building in Lloydminster. Prairie North is a shareholder, along with a limited number of other RHAs, in North Saskatchewan Laundry and Support Services Ltd. of Prince Albert. PNHR currently holds a guarantee of debts in relation to North Sask Laundry, to a maximum of \$67,275.

## **ORGANIZATIONAL EFFECTIVENESS**

### **Governance and Management**

Each year, Prairie North Regional Health Authority develops and implements its operating plan including multi-year financial, human resource, capital, information management, primary health, and population health strategy components. The plans are consistent with the goals and objectives of Saskatchewan's health system strategic plan, in accordance with Saskatchewan Health's timeframes and reporting requirements.

For 2004-05, PNRHA planned three key initiatives: conversion of Paradise Hill Hospital to a health centre; reduction of nursing services at Manitou Health Centre in Neilburg; and closure of the psychogeriatric unit at Saskatchewan Hospital North Battleford. The changes were proposed based on ongoing evaluation of service levels, cost effectiveness and efficiencies in the best use of limited human resources; and assessment of current and future service needs. The changes were implemented in consultation and with the support of Saskatchewan Health.

In advance of implementation, stakeholder meetings were held with staff in the centres impacted by the change. Informational sessions were held with unions. Community public meetings were conducted in Paradise Hill and neighbouring St. Walburg to explain the reasons for the change, and to hear local questions and concerns. Additional meetings were held with Community Advisory groups in Paradise Hill and St. Walburg. Prairie North shared budget and operational information with staff, physicians and stakeholders throughout the Region via a series of meetings at many locations. Presentations were made to municipal councils, business organizations, and service clubs.

As the year progressed and challenges to retain physician services in several of our rural sites deepened, Prairie North had little choice but to restructure service hours and reduce or eliminate emergency services at some locations. Staff and communities were kept apprised of these developments. Consultations occurred with Community Advisory groups, as well as with managers, staff, physicians, and contract service providers in neighbouring locations. Numerous meetings were held at Loon Lake, Goodsoil, Turtleford, and Edam.

Significant consultations were held between Prairie North and our major stakeholder for Lloydminster – East Central Health. Assessment of current and future needs for Lloydminster's rapidly expanding population, and presentation of plans for the future to meet these needs resulted in increased funding and commitment from ECH in support of Lloydminster initiatives. PNHR Board and management officials are actively involved in the Collaboration Committee and the Operational Committee with our counterparts from East Central Health.



Intersectorally, Prairie North has worked over the past year to strengthen the services and programs delivered through the Regional Intersectoral Committee (RIC), KidsFirst, SchoolPlus, and In Motion initiatives. Plans are being made to expand the Acquired Brain Injury Program for Prairie North for 2005-06. The Health Region maintains its services under the federal Youth Criminal Justice Act.

PNHR monitors and reports on the financial status and performance of its health care organizations (HCOs) and contract service providers. Region officials have met with our HCOs over the past year to discuss contracts and accountability. PNHR employees have been assigned to liaise directly with all HCOs and contract service providers.

## **Quality**

### **Accreditation**

In 2004-05, Prairie North Health Region participated in its first-ever Region-wide Accreditation process through the Canadian Council on Health Services Accreditation (CCHSA). A survey team of six individuals with the CCHSA spent a week in the Region touring facilities and sites, and meeting with staff, physicians, and clients to assess Prairie North's performance in matching nationally established standards for governance and leadership, information management, human resources, environmental services, and care and service for patients.

The survey was conducted October 17 – 22, 2004. In the months leading up to the survey, Board members, staff and physicians throughout PNHR spent considerable time and energies conducting self-assessments of their Accreditation Teams' performance in relation to the standards. Thirteen Teams had been established.

#### **PNHR Accreditation Teams**

|                             |                  |                         |
|-----------------------------|------------------|-------------------------|
| Leadership and Partnerships | Environment      | Information Management  |
| Human Resources             | Acute Medical    | Acute Surgical          |
| Ambulatory                  | Community Health | Community Mental Health |
| Home Care                   | Long-Term Care   | Maternal/Child          |
| Mental Health SHNB          |                  |                         |

In December 2004, Prairie North received the results of the survey. The Region was awarded

**Accreditation with Report and Focused Visit.**

PNHR must submit a Progress Report by December 31, 2005 addressing four key areas. A Focused Visit will follow in March 2006.

The survey report recognized and reaffirmed many of the strengths and areas for improvement identified in the Teams' self-assessments. Specifically, the survey report recommends that Prairie North implement a regional ethics policy throughout all levels of the organization; implement a comprehensive regional quality improvement program; complete, approve, roll out and test a regional emergency services plan; and develop and implement standard processes regarding consent.

Prairie North Health Region extends deepest appreciation to all members of the Accreditation Teams for their diligence and commitment to making the Accreditation process a success!

### Concern Handling/Quality of Care

Prairie North Health Region maintains a network of Quality of Care Coordinators (QCCs) to handle client concerns regarding the quality of care they have received. Concerns may be about access to service, care delivery, communication, costs of services, plus environmental and other issues. In 2003-04 – the latest year for which complete data is available – a total of 106 clients contacted PNHR to raise one or more concerns with the Quality of Care Coordinators. QCCs then investigate the concerns and work with Program Managers to resolve the matters. Resolution may mean implementing change to improve the care or service, or educating clients about processes and procedures thereby alleviating client concerns.

| Client Concern Handling 2003/2004 |                                 |                                         |
|-----------------------------------|---------------------------------|-----------------------------------------|
|                                   | Number of<br>Client<br>Contacts | Concerns<br>Concluded<br>within 30 Days |
| PNHR                              | 106                             | 69%                                     |
| Sask.                             | 2,205                           | 87%                                     |

Source: Saskatchewan Health

Concerns are to be handled as quickly as possible. Prairie North's QCCs resolved 69 per cent of 2003-04 concerns within 30 days. That's significantly lower than the provincial average of 87 per cent of concerns resolved within 30 days. Reasons behind PNHR's lower percentage were a lack of dedicated human resources and competing priorities for the QCCs, and complexity of the concerns raised. Comparative numbers for 2002-03 are not available.

### Incident/Occurrence Reporting

Prior to provincial legislation that came into effect September 15, 2004 mandating reporting of critical incidents, Prairie North Health Region monitored and reported adverse events and critical incidents. Reports were provided to Saskatchewan Health on a regular basis and critical incidents were routinely reviewed. With enactment of the legislation, Prairie North has further developed its policies to comply with the Act. Critical incidents are recorded, reviewed, and reported to the provincial Health Department. Education has been provided for staff around the legislation and the reporting requirements.

### Risk Management

Prairie North Health Region has devoted specific resources to Risk Management and Performance Measurement. Three strong risk management practices have been implemented:

- Computerized daily entry of risk management occurrences into a single program and report.
- Development and implementation of Regional OH&S policies, including staff education about Occupational Health & Safety.
- Establishment of an Ethics Framework for implementation of a Regional Ethics program.





## Additional Quality Initiatives

All three major Pharmacy sites in PNHR facilities have completed the Institute for Safe Medication Practices self-assessment tool, and submitted it to the Institute. This has been a major initiative under the Region's rejuvenated Pharmacy and Therapeutics Committee.

Prairie North maintains close linkages with Saskatchewan's Health Quality Council (HQC). Reports of PNHR's Quality Improvement activities are regularly sent to the Council. The Region participates in studies conducted by HQC, and has joined HQC in use of the Cochrane Library, a large internet database designed to help health care providers make treatment decisions and inform patients about the care they receive. Prairie North's Vice-President of Integrated Health Services Cecile Hunt serves on the HQC Board.

## Human Resources

### Healthy Workplaces

Improving the health of our workplaces has been a top priority over the past year for PNHR. Numerous initiatives were undertaken aimed at renewing quality work life for all employees. Elements of healthy workplaces and quality work life include employee morale, job satisfaction, turnover rates, absenteeism, and injury rates.

Absence from work, particularly as a result of illness or injury (sick leave), is one of the indicators used to measure the health of a workplace. According to the Statistics Canada Labour Force Survey, people in health occupations are more likely than those in other sectors to miss work due to illness or disability. In 2000, on average, 7.2 per cent of full-time workers in health occupations missed work each week due to illness or disability. In Saskatchewan, the rate was eight per cent. Professional nurses, who comprise the largest professional group of the health workforce in Saskatchewan, have the highest rate of absences of any occupation.

Number of Sick Leave Hours per Full-Time Equivalent  
by Affiliation – 2004/2005

|       | CUPE  | HSAS  | OOS/Other | SUN   | Total |
|-------|-------|-------|-----------|-------|-------|
| PNHR  | 90.01 | 75.21 | 49.46     | 98.43 | 87.99 |
| Sask. | 94.84 | 63.34 | 47.69     | 93.07 | 88.26 |

Source: Saskatchewan Health

NOTE: The above calculations do not include employee numbers for CUPE Alberta and UNA nurses at Lloydminster.

For PNHR, the numbers indicate an ongoing need to review the health of the workplace, beyond legitimate illness or injury. The Region's total sick leave hours per FTE are among the highest in Saskatchewan's health regions.

Among the initiatives to help address the health of our workplace, quality work life and ultimately, to positively impact our ability to recruit and retain staff, are:

- ongoing support for and expansion of Healthy Workplace Committees at sites throughout the Region
- greater emphasis and coordination of staff education and training, under the auspices of the Staff Development portfolio. An assessment and schedule for staff mandatory education and certification requirements is being developed. Telehealth is proving an ever more valuable tool for staff development and education.
- expansion of Transfer, Lift and Repositioning (TLR) training throughout the Region to assist staff in avoiding injury in any of the work they do.

- receipt of Federal Health Accord funding to assist in the months ahead with purchase of equipment to improve staff safety, patient care, and access.
- funding under the Federal Health Accord will be used to identify and address ergonomic issues in the workplace (Stream 1 funding), and to establish benchmarks and facilitate leadership education and training for managers (Stream 2 funding).

Reducing overtime requirements for staff is another factor in quality work life and improving the health of our workplaces. Adjustments have been made to the Employee Scheduling Program (ESP) to establish a less centralized approach. The aim is to minimize overtime and positively impact the health of our employees.

Realignments in the system, such as closure of the psychogeriatric unit at Saskatchewan Hospital and redeployment of staff to other SHNB departments and programs, have helped to reduce overtime and make the best use possible of our limited human resources. To further the goal of maximizing staff utilization, Prairie North continues to move toward having all professionals use their skills and training to their full scope-of-practice.

Prairie North continues its efforts in ongoing recruitment and retention of staff. Some success has been achieved in recruiting international nurses and other health professionals. The Region supports recruitment and retention initiatives by providing, enhancing, and strengthening focus on clinical placements for health professional students through practicum training and preceptorships.

Provincially, Prairie North actively participates in health human resource planning and strategies for Saskatchewan. The Region is represented on the Provincial Health Human Resources Committee by Vice-President of Corporate/Support Services Irene Denis.

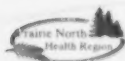
### **Representative Workforce**

PNHR has made progress toward establishing a representative workforce. A Representative Workforce Coordinator is in place and has begun to develop a program around Aboriginal employment. Emphasis is on building a database of qualified Aboriginal potential employees through a comprehensive educational approach. Additionally, Aboriginal Awareness education is ongoing throughout the Region.

### **Financial**

Prairie North Health Region is achieving success in development, implementation, and adherence to its multi-year operational and budget plan. The Region has moved from a \$1.37 million dollar deficit in its first year of operation (2002-03), to a break-even operation in 2003-04 (small surplus of \$22,000), and a \$406,000 surplus operation for 2004-05. The Region continues to focus on long-range, achievable forecasts.

With improvements in forecasting program expectations and delivering accordingly, Prairie North did not initiate any Transfer of Funds between established funding pools for 2004-05. Saskatchewan Health provided guidance and support early in the year on moving forward with change initiatives and resultant funding allocations.





PNHR has long-range internal control policies in place to ensure the ethical and responsible use of all funds, including those from government, partners, and donations. The Region's contracted auditor Deloitte and Touche has implemented a comprehensive Regional audit of financial systems, internal controls, dollars available and dollars used. The Auditor's Report reflects achievement of Prairie North's financial strategies.

A significant strategy over the past year has been to improve the tools and skills of program and facility managers to understand and use the financial reports presented to them monthly, quarterly, and annually. Educational sessions were provided and continue to be scheduled. Processes are being fine tuned for the sharing and circulation of financial information. Financial data is also shared with unions on a quarterly basis.

### **Information Management**

Prairie North's multi-year Information Management Plan guides the Region's activities in information management. New information systems have been implemented for Home Care in Meadow Lake, pharmacy in Lloydminster, laboratory services in North Battleford, and client registration services at Battlefords Union Hospital. The systems will be expanded to other PNHR locations in the year ahead. The systems support program development and delivery, and are consistent with provincial information management policies, data standards and legislative requirements. The Region uses provincially mandated health information systems including the Surgical Care Registry, Saskatchewan Immunization Management System, the Public Health Information System, Mental Health Information System, MDS/RUGS assessment system for long-term care, and others.

The Information Management Plan is closely linked with Prairie North's Information Technology (IT) Plan. Over the past year, the Region has expanded its computer network, expanded IT human resources to Meadow Lake, and further developed computer training labs in Meadow Lake, Lloydminster and Turtleford.

Prairie North continues building toward a Region-wide electronic health record system by adding components of the Saskatchewan Health Information Network (SHIN) and software application systems.

Information management took a significant step forward for PNHR in 2004-05 with establishment of a Performance Measurement Unit to facilitate and rationalize data collection and analysis. While much work remains to determine the scope of the data being collected where, how and for what purpose, the Unit is producing valuable, consistent, quality information on which to base plans and decisions.

### **Communications and Issues Management**

Prairie North Health Region maintains a strong commitment to communication with staff, physicians, partners, and other internal stakeholders, as well as with communities and the general public. Effective communication takes planning and coordination with the many players and audiences involved.

The Region planned and implemented significant communication initiatives in the past year to build public support and awareness of health service delivery changes and approaches surrounding the 2004-05 operating plan and budget. Staff and physician information sessions and consultations were held at numerous sites. Public meetings were coordinated with communities and advisory groups. Internal as well as public notices, information bulletins, and news releases were coordinated around changes in facilities and services.

Other communication approaches were coordinated around Accreditation, Health Promotion, special events, and public health concerns. Many communication activities focused on education and awareness around Saskatchewan's *Tobacco Control Act* which came into force January 1, 2005. West Nile Virus and pandemic influenza preparedness remained priority communication activities in close coordination with Community Health Services.

Prairie North continued to work closely with Saskatchewan Health to deal appropriately with local issues and to ensure that provincial issues remained in the realm of the Department and the Minister.

Prairie North maintained a solid media presence in the Region throughout 2004-05. An average of two news releases per month were issued by PNHR to a broad range of internal and external stakeholders. *Board Notes* are issued monthly highlighting the activities and decisions of the Authority at each regular meeting. Several media outlets in Prairie North print the releases and *Board Notes* verbatim. Other media outlets provide follow-up and expansion on the information provided. A variety of media within the Region regularly attend the Authority's monthly Board meetings, dependent on the meetings' locations.

Prairie North responded to over 275 media requests for information and/or interviews in 2004-05. Significant numbers of media calls concerned budget and financial information, status of physician services, conversion of the Paradise Hill Hospital, *Tobacco Control Act* implementation and enforcement, diseases, ambulance, and other health services. Nearly 75 per cent of the requests for interviews or information were completed within 24 hours or less.

### **Capital**

Prairie North's five-year Capital Management Plan and three-year Capital Equipment Plan guide the Region's activities in capital construction, upgrading and maintenance, and in the servicing, repair, and replacement of capital equipment. All major facility renovations or replacements are conducted in conjunction with Saskatchewan Health and/or East Central Health and Alberta Health and Wellness for projects in Lloydminster. The same holds true for the purchase of major medical equipment. Prairie North is working with Saskatchewan and Alberta jurisdictions on a five-year redevelopment plan for Lloydminster Hospital, including introduction of CT. Acquisition of CT equipment for The Battlefords involves only Saskatchewan Health.

In 2004-05, planning continued on the Maidstone Integrated Facility project which includes renovation of Maidstone Hospital and replacement of the Pine Island Lodge long-term care facility in Maidstone. Before the end of the fiscal year, approval came from the Minister of Health to proceed to the construction phase in 2005-06.



Purchase and expansion of the Home Care building in Lloydminster was completed, and renovation began of the original part of the structure to accommodate all community-based services for Lloydminster at a single site.

Planning continued on renovations to accommodate introduction of CT service at Battlefords Union and Lloydminster Hospitals. An overall five-year expansion and rejuvenation plan for Lloydminster Hospital was developed to meet the rapidly escalating demands of a quickly expanding population and community. Participation in and financial support for the Lloydminster project is being sought from East Central Health, Alberta.

Prairie North is participating with ECH and the community of Lloydminster in planning for redevelopment of Dr. Cooke Extended Care Centre on the Alberta side of the Border City.

Infusion of over \$4 million from Saskatchewan Health through the Federal Health Accord for infrastructure upgrades and purchase of CT scanners, other diagnostic imaging equipment, surgical and patient care equipment has enabled Prairie North to move forward on projects it would otherwise not have been able to achieve. PNRH has planned to meet the highest priority building and equipment needs at sites throughout the Region. The significance of these additional dollars in maintaining our facilities and programs cannot be overstated. Prairie North applauds Saskatchewan Health's decision to direct use of these dollars in this way.

PNRHA likewise acknowledges the substantial support of Foundations, Auxiliaries, Trusts, community groups, organizations and Prairie North Health Region residents in providing financial contributions toward capital projects and equipment purchases. Without this generosity for facilities and programs throughout the Region, Prairie North would face even greater challenges in meeting its demands.

To protect our capital assets now and into the future, Prairie North is moving toward establishment of a Regional Biomedical Program. All maintenance and servicing contracts have been reviewed with the aim of identifying opportunities to improve efficiencies and reduce costs in the repair, maintenance and replacement of capital equipment and systems.

## **Reporting**

Prairie North Health Region regularly reports to Saskatchewan Health and all PNRH stakeholders regarding the Region's activities and operations. An Annual Report is prepared and submitted as required for the Health Minister and the Legislature's approval. The report is widely shared with staff, physicians, and the public.

Operational plans are prepared and submitted as required, on time and in appropriate formats. Quarterly financial reports are developed, submitted to government, and widely shared within the organization. The Region compiles, submits and shares available performance/indicator data that provides information as to how well Prairie North is functioning.

The Region is planning to prepare a comprehensive Regional Population Health Status report, development of which will begin in the coming operating year.

## PROGRAM-SPECIFIC EXPECTATIONS

### **Province-Wide Services**

#### **Saskatchewan Hospital**

Psychiatric rehabilitation services for all Saskatchewan residents requiring such care and treatment are provided at Saskatchewan Hospital North Battleford. This facility is the province's only long-term psychiatric hospital. Services are organized into four key program areas: psychiatric rehabilitation, specialized rehabilitation, transitional, and forensic.

Acting on the recommendations of past consultant and other reports regarding SHNB, Prairie North Health Region, in consultation with Saskatchewan Health, completed the process of decanting and closing the 26-bed psychogeriatric unit at SHNB. The closure was achieved through a lengthy process of attrition (not filling beds as they became vacant), relocating a number of patients to long-term care homes in PNHR and other health regions, and transferring remaining patients to other units in SHNB. Staff were reassigned to other work units at SHNB, filling long-standing vacancies.

Prairie North participated in a facility audit and program analysis of Saskatchewan Hospital. The study was commissioned by the site's owner Saskatchewan Property Management Corporation (SPMC). The report was completed in late 2004 and concludes that the present Sask Hospital facilities do not adequately support existing and future program and service needs of clients and staff. The report recommends replacement of the existing structure. Prairie North believes our Region and the province as a whole have an exciting opportunity to redevelop or replace Saskatchewan Hospital. The Region is working with Sask Health and SPMC to solidify the project as a priority.

#### **Renal Dialysis Program**

The past year marked the first full-year of operation for Prairie North's new Renal Dialysis Program at Battlefords Union Hospital. The Dialysis Clinic opened in December 2003 and is a satellite of the Saskatoon Health Region Home Unit at St. Paul's Hospital, Saskatoon. The satellite clinic continues to operate three days per week at full capacity of six patients in the morning and six in the afternoon.

Lloydminster Hospital is also home to a renal dialysis clinic that is operated totally by the Northern Alberta Renal Program, managed by Capital Health Region, Edmonton, AB.

#### **Cancer Services**

Prairie North collaborates with the Saskatchewan Cancer Agency in the provision of cancer-related services. The Cancer Outreach Program operates out of the Battlefords, Lloydminster, and Meadow Lake hospitals. The three sites are working to establish regional policies and procedures for a consistent Regional approach. Battlefords Union Hospital was successful in the past year in securing a dedicated chemotherapy nurse position. An expanded endoscopy program at BUH, thanks to the generosity of a private donation, has helped to expand the cancer screening program for the Region as a whole.





### **Telehealth**

Prairie North continues to make ever-greater use of the provincial Telehealth network to link patients to specialists in larger centres, improving access and timeliness in delivery of health care service. The system assists rural health care professionals to stay connected with their urban colleagues, and facilitates access to resources, research and educational opportunities. The Battlefords and Meadow Lake are linked through Saskatchewan's Telehealth network, and links to the Lloydminster system that is part of Alberta's WellNet. PNHR is eagerly anticipating expansion of the Saskatchewan network to Lloydminster in 2005-06, connecting the three largest sites in Prairie North to the other Saskatchewan sites via Telehealth.

### **Acute Care**

As of March 31, 2005, PNRHA operated two Regional hospitals – Battlefords Union and Lloydminster; one district hospital – Northwest Health Facility in Meadow Lake; one community hospital – at Maidstone; and one community hospital with an attached special care home – Loon Lake Hospital & Special Care Home, Loon Lake. The Region maintains a broad spectrum of acute care services for its Regional, District and Community hospitals, as set out in *The Action Plan for Saskatchewan Health Care*. Services include ambulatory care, diagnostic imaging, laboratory services, emergency, medical, surgical, and obstetrical care, among others.

At Lloydminster Hospital, Prairie North significantly increased staffing in the Obstetrics, Medicine, and Emergency Departments, and added three beds to the Medical floor, in an effort to bolster acute care service for residents of the rapidly growing community and area. Changes to the Neilburg and Paradise Hill services put some added pressure on services at Lloydminster. A five-year renovation and expansion plan for Lloydminster Hospital has been developed to meet current and future acute care needs.

To ensure consistent availability of emergency services for the Turtleford, St. Walburg, and Edam areas, physician on-call, after hours and emergency services were consolidated at Riverside Health Complex in Turtleford. The initiative resulted in part from significant challenges retaining sufficient physician resources for the area. Clinics were made available at St. Walburg and Edam on a visiting or regular basis.

Regrettably, in response to declining utilization, tenuous availability of nursing and physician resources, and the need to manage the long-term sustainability of health care services regionally, Prairie North converted Paradise Hill Hospital to a health centre, effective October 1, 2004. Nursing services at Manitou Health Centre in Neilburg were reduced, effective October 1, as were diagnostic services to match visiting physician services. Staff and communities were notified in advance of the changes. The conversions were completed on target.

### **Surgical Services**

Prairie North delivers surgical services in accordance with the Saskatchewan Surgical Care Network (SSCN). The Region participates fully in the Surgical Patient Registry and all surgeons in Prairie North facilities utilize standardized clinical tools for select procedures.

Prairie North maintains busy surgical programs at its Regional hospitals in Lloydminster and North Battleford, and at its District hospital in Meadow Lake. The Region boasts virtually no waitlist, with over 2,300 surgeries performed in PNHR in 2004-05.

### **Medical/Physician Services – Specialists and Other**

Prairie North Health Region recorded success in the past year in maintaining relatively stable Specialist services for our population. A new radiologist was recruited to The Battlefords to replace an individual who left the Region. Anaesthetic services at BUH were maintained by local General Practitioners/Anaesthetists. General surgery services in The Battlefords were stabilized with return of a surgeon on leave.

Surgical services in Lloydminster were stretched with departure of all three General Surgeons. One surgeon has been recruited for Lloydminster, with a second to arrive in the fall of 2005. The Internal Medicine speciality in Lloydminster has been rebuilt with recruitment of three Internists in the past year. A new Paediatrician is expected to arrive in Lloydminster in September 2005.

In Meadow Lake, visiting Ophthalmology service began in January 2005.

In The Battlefords, a new full-time Emergency Room Physician program was launched, ensuring a doctor is on-site at Battlefords Union Hospital 24-hours a day. The program is a hybrid, including the three dedicated ER physicians, plus additional service from local private practice doctors. The program will become fully implemented in 2005-06.

The past year saw some turnover of General Practitioners at various sites in Prairie North Health Region, particularly in rural locations. Challenges were encountered maintaining physician on-call, after hours, and emergency services in Loon Lake, Goodsoil, St. Walburg and Edam. Services were realigned and periodically consolidated among the sites and with larger neighbouring centres to maintain access to care for patients and clients. Meetings with staff, physicians, stakeholder groups, and communities were held to keep people advised of the actions being implemented, the availability of services, and physician recruitment initiatives underway. By year-end, physician on-call services for the Turtleford, Edam and St. Walburg areas were consolidated in Turtleford. A Municipal Health Holdings organization was being formed for the area to establish a group physician practice and aid in recruitment and retention of doctors to serve the communities. Overall, Prairie North has taken a supportive role in recruitment of family physicians in partnership with rural communities.

### **Institutional Supportive (Long-Term) Care**

Prairie North Health Region provides accessible, appropriate, and safe long-term care services to residents requiring such care, through a network of continuing care facilities in Cut Knife, Edam, Goodsoil, Lloydminster, Loon Lake, Maidstone, Meadow Lake, The Battlefords, Turtleford and St. Walburg. The total number of long-term and respite beds in PNHR is 594, plus an additional 40 at the Region's affiliate long-term care facility Villa Pascal in North Battleford.



To meet client needs and make the best, most appropriate use of these limited institutional supportive care resources, Prairie North has implemented the Single Entry Point (SEP) process for access to all Respite Care, Enriched Housing, and Long-Term Care. All options are explored and used where appropriate before an individual becomes a resident of long-term care. Placement in a long-term care bed is based on need. The goal of Single Entry Point is to ensure the client with the greatest need receives the most appropriate care as quickly as possible.

Prairie North has worked to educate clients, families, and communities about the SEP process. Linkages are in place with facilities in rural communities surrounding Lloydminster, Alberta to further facilitate placement and care options.

The Region uses the MDS/RUGS assessment and classification system for long-term care clients to provide ongoing monitoring of care needs.

Prairie North maintains the service of the Behaviour Management Consultant for the northern half of Saskatchewan, to assist in planning, developing and evaluating programs appropriate for the needs of difficult-to-manage supportive care clients with dementia or similar conditions. A significant component of this role also focuses on ongoing staff development and support.

### **Home-Based Supportive Care**

Home-based supportive care or Home Care services are an integral component of Prairie North's continuum of care. Access to the Region's Continuing Care program is through Home Care and Home Care Assessment. Home Care services include assessment and care coordination, nursing, personal care, respite, meals, home management, and minor home maintenance.

A number of clients in PNHR have exercised the individualized funding option for their own provision of home care services. A specific Home Care assessor has regional responsibility for management of the individualized funding program. Collaborative work continues with housing authorities and other stakeholders in many of our communities to assist seniors and people with disabilities remain independent. The Region also delivers home care services to children with highly complex care needs for which PNHR has received specific funding.

Prairie North has identified a need throughout the Region for Assisted Living facilities for clients who can no longer be supported independently at home with Home Care services alone, but who do not yet require full-time permanent long-term care. Development of a 10-bed Assisted Living unit in available space at River Heights Lodge in North Battleford is underway. Prairie North is collaborating with East Central Health Region, AB to redevelop Dr. Cooke Extended Care Centre in Lloydminster, including supportive housing to accommodate at least 40 residents. Opportunities are being explored with communities wherever feasible to further develop assisted living/supportive housing opportunities. Prairie North operates the Enriched Housing Program in Meadow Lake in conjunction with the Northland Pioneers Lodge long-term care facility.



### Home-Based Acute and Palliative Care

Home-based acute and palliative care are part of the integrated continuum of care in Prairie North Health Region. Palliative Care Coordinators participate in the multi-disciplinary Care Team in hospital and in the community, including discharge planning, home care, social work, nursing, and physician components. Home visits monitor and support patients and families. Community support and appreciation of the program is high, evidenced by the ongoing generous financial contributions from communities throughout Prairie North toward enhancing facility and at-home comfort measures for palliative care clients.

### Population Health Services

Prairie North Health Region strengthened its emphasis on Population Health Services in 2004-05 beginning with restructuring of Community Health Services. The program is now known as Population Health Services with managers in place specifically for Public Health, Rehabilitation Services and Environmental Protection. The Region's Medical Health Officer remains a key member of the Population Health Team. The Team has made significant progress over the past year in implementing the Population Health Promotion Plan.

Progress has been made toward achieving the provincial and local plans' goals of mental well-being, accessible nutritious food, decreased substance use/abuse, and active communities. A Mental Health Awareness steering committee has been established and is working to raise the profile of mental well-being in the Region. Workplace Wellness plans are in place for PNHR, along with a staff development coordinator to help facilitate workplace wellness initiatives among PNHR staff. Good Food Box and Community Kitchen programs are up and running in Prairie North, with opportunities to expand the programs being explored. A breastfeeding steering committee is in place and is exploring opportunities for educational and support group initiatives.

Education of the public around addiction, Fetal Alcohol Spectrum Disorder (FASD), and gambling issues is ongoing. FASD committees are functioning in North Battleford and Meadow Lake. Expansion to Lloydminster is anticipated in 2005-06. A Harm Reduction program, including a needle exchange component, is operating in The Battlefords and is anticipated for expansion to Meadow Lake and Lloydminster in the coming year. PNHR is assessing the possibility of expanding the program to smaller communities in the Region.

Activity-wise, Prairie North is an In Motion health region, with the emphasis shifting from awareness to sustainability through numerous events and participation challenges. Injury prevention is another priority for PNHR's Population Health Unit. The Unit is partnering with local groups and organizations to host bicycle safety rodeos and family safety fairs that can be expanded throughout Prairie North. Development of Regional injury prevention/safety materials is being undertaken.

Prairie North continues to deliver a broad range of public health services including immunizations for children and adults. Prairie North was successful in increasing the number and percentage of residents age 65 and over who received influenza immunization in 2003-04, the most recent year for which complete data is available. Increased local initiatives to inform and educate clients around the benefits of influenza immunization were undertaken.

Provincial, national, and international public and media attention to the potential for pandemic influenza is also a likely factor in increased immunization rates.

Immunization rates provide information on the extent to which preventive measures are in place and being utilized to control life-threatening diseases. Enhanced immunization results in reduced prevalence of these diseases and can decrease morbidity and mortality in high-risk population groups, such as the elderly.

Influenza Immunization Rates, Age 65 Years and Over

|           | Number of Adults 65+ | Number of Adults 65+ Immunized | % of Adults 65+ Immunized |
|-----------|----------------------|--------------------------------|---------------------------|
| PNHR      |                      |                                |                           |
| 2003/2004 | 8,119                | 5,909                          | 72.8%                     |
| 2002/2003 | 8,207                | 5,173                          | 63.0%                     |
| Sask.     |                      |                                |                           |
| 2003/2004 | 147,543              | 97,142                         | 65.8%                     |
| 2002/2003 | 148,433              | 92,750                         | 62.0%                     |

Source: Saskatchewan Health

Nearly three-quarters of PNHR's adult population over age 65 received flu shots in 2003-04, compared to 63 per cent in 2002-03. The provincial influenza immunization rate also rose, but not as sharply. Prairie North's rate was the highest in the province. The rates do not include flu shots provided by private agencies which did not submit reports to public health.

Monitoring the incidence of sexually transmitted disease is an important indicator of the health of our population and the need for action on communicable disease control, education and follow-up. The incidence of genital Chlamydia infections is an indication of the frequency of unprotected sexual activity which puts people at risk of other serious sexually transmitted diseases such as gonorrhea, Hepatitis B and HIV, as well as unplanned pregnancy. In Prairie North, as indicated in the following table, the number of cases and genital Chlamydia rate in females has fallen, while the opposite is true for males. Rates for both sexes remain higher than the provincial rates.

Genital Chlamydia Rate per 100,000 Population

|       | Females     |            |                  | Males       |            |                  |
|-------|-------------|------------|------------------|-------------|------------|------------------|
|       | Total Cases | Population | Rate per 100,000 | Total Cases | Population | Rate per 100,000 |
| PNHR  |             |            |                  |             |            |                  |
| 2003  | 209         | 35,007     | 597.0            | 98          | 35,539     | 275.8            |
| 2002  | 223         | 35,363     | 630.6            | 80          | 36,179     | 221.1            |
| Sask. |             |            |                  |             |            |                  |
| 2003  | 2,406       | 508,277    | 473.4            | 1,339       | 499,476    | 268.1            |
| 2002  | 2,334       | 515,142    | 453.1            | 1,281       | 509,685    | 251.3            |

Source: Saskatchewan Health

PNHR maintains a partnership with Battlefords Family Health Centre to operate a Sexual Health Clinic in the Region.



A major initiative of the past year has been preparation for and enforcement of the new provisions of the provincial Tobacco Control Act which came into effect January 1, 2005. Public Health Inspectors undertook a myriad of activities prior to January 1 to educate and inform the public about the requirements and implications of the legislation governing smoke-free public places. PNHR joined provincial initiatives to communicate with the general public about its responsibility under the Act. Monitoring and enforcement activities began in January and have become part of the ongoing work of Public Health Inspectors.

In Prairie North, enforcement of the smoke-free legislation proved especially challenging at Lloydminster where smoking is not allowed in public places on the Saskatchewan side of the Border City, and is allowed on the Alberta side. The issue of differing legislation in separate provincial jurisdictions remains. In The Battlefords, enforcement is also challenging due to jurisdictional and legislative differences surrounding the First Nations casino.

### **Community Care Services**

Outpatient mental health, rehabilitation, alcohol, drug and problem gambling services comprise the broad spectrum of community care services provided by Prairie North Health Region. Child and Youth, Adult Community, and Psychiatric Rehabilitation Services work together to promote, preserve and restore the mental health of the children, adults, and families of PNHR.

Additional Community Care programs include Successful Mothers Support, Early Skills Development, Child and Youth Coordinated Behaviour Management, Alternatives to Violence, and Adult Sex Offender initiatives. In the past year, a position was established to support the requirements of the Youth Criminal Justice Act. The Early Skilled Development program was expanded to Lloydminster.

The Shared Care Model implemented in Lloydminster in 2003-04 continued to solidify. Feedback has been positive from physicians, health care staff, and clients. A review of the program is to be conducted in the year ahead, with expansion anticipated to other areas of Prairie North.

The Region faced staffing challenges for some Community Care services in Lloydminster and Meadow Lake, particularly in the area of counselling and early skills development. Resources were shifted from The Battlefords in the short-term to assist in addressing waitlist concerns. Recruitment is an emphasis, especially for hard-to-recruit positions. Prairie North is developing a comprehensive Rehabilitation Services Strategy to address ongoing resource and service needs. In the interim, innovation has been a key. A highly successful education session for parents of children requiring speech-language service was held in Meadow Lake to help give parents tools to assist with their children. Preliminary plans are to expand the sessions to North Battleford and Lloydminster.

Podiatry services were stabilized in The Battlefords and have been expanded to Turtleford. Prairie North was likewise successful in recruiting a new coordinator for the Regional Intersectoral Committee which works with community partners for the well-being of children, youth and families in the northwest part of Saskatchewan. The Committee facilitates integrated approaches for programs and services in the northwest.



Comprehensive outpatient alcohol, drug, and problem gambling services are available throughout Prairie North. Services include assessment, referral, treatment, case management, prevention, education and intervention. PNHR Addictions Services also delivers the Safe Driving Program at the local level.

With growing emphasis provincially and nationally on addictions, Prairie North is preparing to conduct a thorough review of Mental Health and Addictions Services in the Region, leading to development of a comprehensive Mental Health and Addictions Strategy. In the interim, Prairie North maintains a relatively successful Addictions program. Over half of the individuals admitted to alcohol and drug outpatient treatment programs in PNHR in 2003-04 completed their program. It must be noted that clients themselves must be ready for treatment and be properly directed to a service that most completely addresses their needs. It should also be recognized that for many substance abusers, success comes only after several failed attempts at alcohol and drug addiction treatment.

**Alcohol and Drug Outpatient Treatment Completion Rate  
per 100 Admissions 2003-004**

|      | Total<br>Complete | Total<br>Incomplete | Grand Total | Completion Rate |
|------|-------------------|---------------------|-------------|-----------------|
| PNHR | 567               | 452                 | 1,084       | 55.6%           |

Source: Saskatchewan Health

### **Mental Health and Addiction Services (Short-Term Inpatient and Residential)**

Inpatient mental health services in PNHR for people with acute psychiatric illness are provided in a 22-bed inpatient unit at Battlefords Union Hospital. Psychiatric inpatient care and programming includes assessment, crisis intervention, stabilization, treatment, and early activities of rehabilitation. Over the past year, the trend toward younger age clients and increased acuity in these clients has continued. As part of the upcoming Mental Health and Addictions Services review, PNHR will be examining this trend with the view to re-evaluating services in response.

Inpatient alcohol and drug addiction services in PNHR are provided at the Walter A. "Slim" Thorpe Recovery Centre in Lloydminster. The "Slim" Thorpe Centre, as it is commonly known, is a Health Care Organization contracted with the Region. Hopeview Residence in North Battleford is operated by Prairie North and delivers inpatient treatment in a co-educational environment for individuals striving to recover from chemical dependency. PNHR has a high rate of completion of its inpatient alcohol and drug treatment programs.

**Alcohol and Drug Inpatient Treatment Completion Rate per 100 Admissions 2003-04**

|       | Number<br>of Beds | Number of<br>Discharges | Number who Completed Treatment<br>or Completed/Transferred | Percentage<br>Who Completed |
|-------|-------------------|-------------------------|------------------------------------------------------------|-----------------------------|
| PNHR  | 5                 | 63                      | 50                                                         | 79.4%                       |
| Sask. | 91                | 1,173                   | 800                                                        | 68.2%                       |

Source: Saskatchewan Health

Pressure continues to grow on the Walter A. "Slim" Thorpe Recovery Centre in Lloydminster to provide inpatient detox services. Currently, detoxification of alcohol and drug abuse patients in Prairie North Health Region is handled on the Medical wards of the Region's hospitals. None function with designated detox beds. The Region's pending Mental Health and Addictions Strategy is anticipated to include a detoxification component.

### **Primary Health Care Services**

Prairie North Health Region has made progress in the past year implementing its Primary Health Care Plan consistent with the core elements of *The Saskatchewan Action Plan for Primary Health Care*. The Plan has been updated and now includes the Regional Diabetes Plan. Members of the Diabetes Team are being incorporated with Primary Health Care Teams. Physician, pharmacist, and additional First Nations representation has been included in the Region's Primary Health Care planning committee.

In December 2004, Prairie North expanded its Primary Health Care network and the percentage of the population with access to a Primary Health Care Team by establishing Goodsoil as a satellite Primary Health Care site of the Loon Lake site. A Primary Care physician and a Primary Care nurse were recruited to provide medical services to residents of Goodsoil and area. Visiting services are also provided to Pierceland. Other members of the satellite Team who provide visiting services to Goodsoil are PNHR Nutritionists, Therapists, Mental Health and Addictions Counsellors, Public Health Nurses, and Home Care Nurses and Aides.

Regrettably, Primary Health Care physician services to Goodsoil would be disrupted by late April with the pending departure of the doctor. Efforts began in late 2004-05 to recruit a replacement.

Prairie North's strategy is to work with existing health centres to educate and integrate them as part of Primary Health Care Teams. Information was shared with staff and communities around Turtleford, Edam, and St. Walburg to explain the concept and benefits of the Primary Health Care model. At Turtleford, as physician on-call services were consolidated at Riverside Health Complex, staff and physicians were presented with information as to how the new on-call status fits into a central Primary Health Care site model. Education is ongoing throughout the Region to promote and develop support for Primary Health Care.

To help move the Primary Health Care concept forward, PNHR designated two positions to the program. The program reports regularly to Saskatchewan Health on the activities surrounding Prairie North's PHC initiatives. The Region participated in the interim evaluation of the Loon Lake PHC site, in preparation for the five-year review of the Loon Lake program and the Battlefords Family Health Centre PHC in North Battleford. Team facilitation and support continues to be provided to PHC sites in The Battlefords, Loon Lake, and Goodsoil, and to the Diabetes Team.





## **Emergency Response Services**

PNHR provides emergency medical response/road ambulance service to the Region through a combination of Region-owned and operated, and privately contracted providers. Advanced Life Support (ALS) and Paramedic services are available in The Battlefords and Meadow Lake.

In the past year, contracts with the Region's ambulance services have been reviewed. PNHR has moved closer to fully centralized medical dispatch in order to better coordinate ambulance service, and improve service to patients. Centralized dispatch has been expanded to Lloydminster and remains a work in progress for The Battlefords. It is anticipated the Region will have complete wide-area dispatch by mid-June, 2005.

## **Program Support Services**

Program support services are vital components of the overall strength of Prairie North Health Region. They include the Board, Executive, Finance, Human Resources, Information Technology and Communications Services. For 2004-05, PNHR maintained its administrative costs at 4.2 per cent of its overall base operating funds. The percentage is on the low end of the range for all Saskatchewan Health Regions and is below the provincial target of five per cent.

Prairie North functions with a single accounting system, with financial processes and reporting systems standardized regionally. A single payroll system is utilized for all Saskatchewan employees of PNHR. A separate system is used for PNHR's employees on the Alberta side of the border, at Dr. Cooke Extended Care Centre in Lloydminster.

The Region works with its partnering organizations including Emergency Medical Service (EMS) operators and health care organizations (HCOS) to ensure relevant, timely and accurate financial reporting for contracted services. HCOs and community-based organizations (CBOs) provide regular financial reports consistent with contract requirements. Discussions are ongoing to improve the processes with EMS providers.

Initiatives are ongoing to continually improve materials management and information technology processes with the view to reducing expenditures and increasing efficiencies wherever possible. Various commodities and systems have been standardized, particularly for rural sites. Improvements have been made in the movement of goods and services to and from Regional locations. Additional improvements are planned for the year ahead.

Prairie North works diligently to improve awareness and support for all that it does, especially for its role in the overall planning, management and delivery of health services and for its operational plan and long-term Vision. Transparency and accountability are cornerstones of these efforts through two-way communication with stakeholders and the general public. The media is an important tool in building that support, understanding and trust. As identified earlier in this report, PNHR has established a strong and consistent media presence and manages its media relations in a timely and appropriate manner. Prairie North also works with other health regions and Saskatchewan Health to appropriately address local and provincial issues.

## Challenges and Future Directions

Prairie North Regional Health Authority has achieved much over the past year and has set initiatives in motion, the true impact of which will be measurable in the months and years to come. Our Vision has remained clear: "Healthy People in Healthy Communities." Our Mission holds strong: "Working together to promote and support healthy living in healthy communities."

With our Values, Goals and Objectives to direct us, Prairie North has established a Strategic Plan to serve as a road map into the future. The results of our 2004 Accreditation Survey also help guide our activities.

For 2005-06 and beyond, the challenges and opportunities we face are considerable. Prairie North continues to work toward positioning ourselves for the future: meeting challenges head on, and anticipating, creating and moving on opportunities to provide the very best care and service we can to meet the needs of our residents.

### **Goal: Improved Access to Quality Health Services**

- Implement CT services in The Battlefords and Lloydminster.
- Continue implementation of PNHR's Primary Health Care Plan, focusing first on stabilization of Primary Health Care Services at Goodsoil/Loon Lake.
- Maintain physician specialist services and explore opportunities to expand these services.
- Increase initiatives to recruit health care workers to professional positions.
- Fully implement the Emergency Room Physician program that began in 2004-05 at Battlefords Union Hospital.
- Expand Telehealth services at Lloydminster to link with the Saskatchewan Telehealth Network.
- Improve recognition and utilization of our Regional hospitals' capacities in surgical and other specialty areas, and in day-to-day services and programs.
- Support Assisted Living development to address an identified gap in Continuing Care services.
- Replace/rejuvenate long-term care facilities, including Northland Pioneers Lodge in Meadow Lake and Battlefords District Care Centre.
- Replace/regenerate Saskatchewan Hospital North Battleford (SHNB).
- Expand the SHNB Forensics program.
- Enhance Emergency Medical Services to rural communities.



### **Goal: Effective Health Promotion and Disease Prevention**

- Support continued implementation of the Region's Population Health Promotion Plan.
- Establish and implement a Regional Chronic Disease Management Strategy and Rehabilitation Strategy.
- Develop a Regional Mental Health and Addictions Strategy that successfully balances priorities between prevention and intervention initiatives.
- Implement new provincial immunization programs.
- Complete pandemic and emergency preparedness plans.
- Enhance the Region's infection control program.
- Maintain emphasis on Saskatchewan's *Tobacco Control Act* and compliance with the legislation.
- Strengthen interagency collaboration and create strong working relationships with First Nations and Metis people in addressing health determinants for their population.

### **Goal: Retain, Recruit and Train Health Providers**

- Fully implement the Region's Healthy Workplace and Quality Work Life initiatives.
- Identify and address workload issues in all sectors.
- Participate in and implement the findings of the provincial Employee Satisfaction/Opinion Survey.
- Explore new strategies and strengthen existing initiatives to recruit health professionals to hard-to-recruit positions.
- Continue emphasis on working with communities to strengthen physician resources in rural locations.
- Strengthen support and development of preceptors, and enhance facilitation of student programs to provide adequate and appropriate student placement experiences.
- Develop a comprehensive education and training plan for staff and professionals, including leadership and management development, to aid in human resource retention.
- Fully develop and implement the Region's Representative Workforce initiative.
- Expand Information Technology leadership and training to support programs throughout the Region.
- Continue development and support of all professionals to function to their full scope-of-practice.

## Goal: A Sustainable, Efficient, Accountable and Quality Health System

- Fully address the key recommendations of the Region's Accreditation survey, including implementation of a regional ethics policy and framework; implementation of a comprehensive quality improvement program; completion and testing of a regional emergency services plan; and implementation of standard processes around consent.
- Refine critical incident processes and policies to improve patient safety and reduce risk.
- Conduct operational reviews of laboratory, diagnostic imaging and pharmacy services throughout the Region to improve consistency, practices, and overall efficiencies.
- Strengthen Attendance Management Strategies to reduce costs and achieve a sustainable, quality health system.
- Continue development and use of evidence-based information to allocate resources and balance budgets.
- Maintain Capital Management and Capital Equipment plans to facilitate investment in infrastructure improvements and achievement of operational and energy efficiencies.
- Develop a Regional Biomedical Program to more efficiently and effectively identify and manage PNHR's ongoing equipment service and repair needs.
- Fully implement all requirements of Saskatchewan's *Health Information Protection Act*, by emphasizing education of staff.
- Support and participate in the Saskatchewan Health Quality Council's Chronic Disease Management Collaborative to improve the quality of care and the caring experience by encouraging use of best practice.
- Strengthen relationships and commitments with major funding partners, including East Central Health, AB to ensure financial resources are in place to meet ongoing demands for growth in programs, services, and facilities at Lloydminster.
- Complete replacement of Pine Island Lodge in Maidstone, with redevelopment of Maidstone Hospital into the Maidstone Integrated Facility.

### Summary

The process of change will continue in Prairie North as the Health Region strives to seek efficiencies and cost-savings while at the same time, improving the delivery of quality services and care. Managing growth and the increasing demand for services, and ensuring long-term sustainability of the system will be an ongoing challenge within finite resources and pressures on health human resources. Creative and innovative ideas and solutions will continue to be sought and explored.



## Performance Management Summary

| Indicator                                                                                                                                 | Prairie North<br>RHA                   | Provincial<br>Comparison | Range                   |
|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------|-------------------------|
| Organizational Effectiveness Indicators                                                                                                   |                                        |                          |                         |
| 2.1.1.1. CCHSA current accreditation status for RHAs                                                                                      | Accredited with Report & Focused Visit | n/a<br>(not applicable)  | n/a<br>(not applicable) |
| 2.1.1.2. Number of client contacts with the Regional Quality of Care Coordinator to raise a concern 2003-04                               | 106                                    | n/a                      | n/a                     |
| 2.1.1.3. Percentage of concerns raised with a Quality of Care Coordinator concluded within 30 days 2003-04                                | 69%                                    | 87%                      | 25% - 90%               |
| 2.1.1.8. * Number of sick leave hours per full time equivalent (FTE) PROVIDER UNION (CUPE) 2004-05                                        | 90.1                                   | 94.84                    | 74.09 - 107.86          |
| Number of sick leave hours per full time equivalent (FTE) HSAS 2004-05                                                                    | 75.21                                  | 63.34                    | 52.54 - 120.03          |
| Number of sick leave hours per full time equivalent (FTE) OOS/OTHER* 2004-05                                                              | 49.46                                  | 47.69                    | 38.86 - 56.87           |
| * Category captures all non-unionized employees on the SAHO Payroll system, not just management personnel                                 |                                        |                          |                         |
| Number of sick leave hours per full time equivalent (FTE) SUN 2004-05                                                                     | 98.43                                  | 93.07                    | 70.00 - 98.43           |
| 2.1.1.9. * Number of wage driven premium hours (overtime and other premiums) per full time equivalent (FTE) PROVIDER UNION (CUPE) 2004-05 | 24.77                                  | 26.65                    | 11.30 - 61.97           |

| Indicator                                                                                                                    | Prairie North<br>RHA | Provincial<br>Comparison | Range          |
|------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------|----------------|
| Number of wage driven premium hours<br>(overtime and other premiums) per full<br>time equivalent (FTE) HSAS 2004-05          | 21.47                | 22.38                    | 2.89 - 48.65   |
| Number of wage driven premium hours<br>(overtime and other premiums) per full<br>time equivalent (FTE) OOS/OTHER*<br>2004-05 | 2.61                 | 2.43                     | 0.00 - 6.45    |
| * Category captures all non-unionized<br>employees on the SAHO Payroll system,<br>not just management personnel              |                      |                          |                |
| Number of wage driven premium hours<br>(overtime and other premiums) per full<br>time equivalent (FTE) SUN 2004-05           | 81.03                | 63.99                    | 19.92 - 314.54 |
| 2.1.1.10. Health system full time equivalents<br>(FTEs) PROVIDER UNION (CUPE - SK)<br>2004-05                                | 1,165.39             | n/a                      | n/a            |
| Health system full time equivalents<br>(FTEs) PROVIDER UNION<br>(CUPE - Alberta) 2004-05                                     | 88.75                | n/a                      | n/a            |
| Health system full time equivalents<br>(FTEs) HSAS 2004-05                                                                   | 112.34               | n/a                      | n/a            |
| Health system full time equivalents<br>(FTEs) OOS/OTHER* 2004-05                                                             | 126.55               | n/a                      | n/a            |
| * Category captures all non-unionized<br>employees on the SAHO Payroll system,<br>not just management personnel              |                      |                          |                |
| Health system full time equivalents<br>(FTEs) SUN 2004-05                                                                    | 378.75               | n/a                      | n/a            |
| Health system full time equivalents<br>(FTEs) UNITED NURSES OF ALBERTA<br>(UNA) 2004-05                                      | 13.51                | n/a                      | n/a            |



| Indicator                                                                                                                                                                  | Prairie North<br>RHA | Provincial<br>Comparison | Range           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------|-----------------|
| 2.1.1.11.* Number of lost-time WCB claims per 100 full time equivalents (FTEs) 2004-05                                                                                     | 9.25                 | 6.52                     | 4.32 - 9.67     |
| 2.1.1.12.* Number of lost-time WCB days per 100 full time equivalents (FTEs) 2004-05                                                                                       | 233.23               | 345.86                   | 152.43 - 492.92 |
| 2.1.1.17.* Worked hours as a percentage of paid hours PROVIDER UNION (CUPE) 2004-05                                                                                        | 81.0%                | 79.8%                    | 78.5% - 81.5%   |
| Worked hours as a percentage of paid hours HSAS 2004-05                                                                                                                    | 82.0%                | 82.0%                    | 79.7% - 83.5%   |
| Worked hours as a percentage of paid hours OOS/OTHER* 2004-05<br>* Category captures all non-unionized employees on the SAHO Payroll system, not just management personnel | 69.5%                | 81.1%                    | 69.5% - 83.7%   |
| Worked hours as a percentage of paid hours SUN 2004-05                                                                                                                     | 85.4%                | 79.1%                    | 77.3% - 85.4%   |
| 2.1.1.18.a Working capital ratio 2004-05                                                                                                                                   | 1.30                 | n/a                      | .45 - 1.69      |
| 2.1.1.18.b Number of days able to operate with working capital 2004-05                                                                                                     | (2.31)               | n/a                      | (68.06) - 28.83 |
| 2.1.1.19. Surplus/deficit as a percentage of actual expenditure 2004-05                                                                                                    | 0.3%                 | n/a                      | (1.5%) - 1.4%   |
| 2.1.1.21. Budget versus actual expenditures ACUTE CARE funding pool 2004-05                                                                                                | (656,752)            | n/a                      | n/a             |
| Budget versus actual expenditures SUPPORTIVE CARE funding pool 2004-05                                                                                                     | (715,084)            | n/a                      | n/a             |
| Budget versus actual expenditures COMMUNITY BASED CARE funding pool 2004-05                                                                                                | 273,247              | n/a                      | n/a             |

| Indicator                                                                                                                      | Prairie North<br>RHA | Provincial<br>Comparison | Range         |
|--------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------|---------------|
| Budget versus actual expenditures<br>PROGRAM SUPPORT funding pool<br>2004-05                                                   | 502,912              | n/a                      | n/a           |
| Program-Specific Indicators                                                                                                    |                      |                          |               |
| <i>Province-Wide Services</i>                                                                                                  |                      |                          |               |
| 2.2.1.2. Number of exams for specialized medical<br>imaging services: magnetic resonance<br>imaging (MRI) scans 2004-05        | n/a                  | n/a                      | n/a           |
| 2.2.1.3. Number of exams for specialized medical<br>imaging services: computed tomography<br>(CT) scans 2004-05                | n/a                  | n/a                      | n/a           |
| 2.2.1.4. Average wait time in days for admission<br>to Saskatchewan Hospital North<br>Battleford (SHNB) 2004                   | 41                   | 59                       | 41 - 76       |
| 2.2.1.6. Alcohol and drug inpatient treatment<br>completion rate per 100 admissions –<br>Calder Centre Child and Youth 2003-04 | 50.0%                | 61.6%                    | 44.4% - 91.7% |
| Alcohol and drug inpatient treatment<br>completion rate per 100 admissions –<br>Calder Centre Adults 2003-04                   | 73.1%                | 70.3%                    | 50% - 95.5%   |
| <i>Acute Care Services</i>                                                                                                     |                      |                          |               |
| 2.2.2.3.a * Number of surgical cases 2004-05                                                                                   | 2,377                | n/a                      | n/a           |
| 2.2.2.3.b * Percentage of surgical cases performed<br>as day surgery 2004-05                                                   | 58.0%                | 53%                      | 48% - 66%     |
| 2.2.2.4. * Percentage of surgical cases completed<br>within 6 months 2004-05                                                   | 100%                 | 81%                      | 74% - 100%    |
| Percentage of surgical cases completed<br>within 12 months 2004-05                                                             | 100%                 | 91%                      | 85% - 100%    |



| Indicator                                                                                                                                                                                   | Prairie North<br>RHA | Provincial<br>Comparison | Range          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------|----------------|
| Percentage of surgical cases completed within 18 months 2004-05                                                                                                                             | 100%                 | 95%                      | 93% - 100%     |
| <i>Population Survey/Vital Data Sources</i>                                                                                                                                                 |                      |                          |                |
| 2.2.4.5. Prevalence of pressure sores: percentage of institutional supportive care residents with pressure sores October 2004                                                               | 28.2%                | 21.8%                    | 12.7% - 29.1%  |
| <i>Population Health Services</i>                                                                                                                                                           |                      |                          |                |
| 2.2.6.1. Percentage of eligible population receiving immunization at second birthday (vaccine coverage rate) DIPHTHERIA 2004*                                                               | 69.2%                | 73.3%                    | 57.3% - 86.3%  |
| * NOTE: SIMS does not capture on-reserve immunizations                                                                                                                                      |                      |                          |                |
| Percentage of eligible population receiving immunization at second birthday (vaccine coverage rate) MEASLES 2004*                                                                           | 67.0%                | 71.7%                    | 57.3% - 85.6%  |
| * NOTE: SIMS does not capture on-reserve immunizations                                                                                                                                      |                      |                          |                |
| 2.2.6.6. Genital chlamydia rate per 100,000 population MALES 2003                                                                                                                           | 275.8                | 268.1                    | 27.4 - 3,259.0 |
| Genital chlamydia rate per 100,000 population FEMALES 2003                                                                                                                                  | 597.0                | 473.4                    | 53.8 - 5,784.4 |
| 2.2.6.7. Influenza immunization rate per 100 population (age 65 years and over) 2003-04                                                                                                     | 72.8%                | 65.8%                    | 56.8% - 72.8%  |
| 2.2.6.8. Population health promotion plan approved by RHA boards and submitted as part of health region operational plans (fall 2004) and progress report March 31, 2005 [yes/no indicator] | Yes                  | n/a                      | n/a            |

| Indicator                                                                                                                                                                      | Prairie North<br>RHA | Provincial<br>Comparison | Range         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------|---------------|
| <i>Community Care Services</i>                                                                                                                                                 |                      |                          |               |
| 2.2.7.2. Alcohol and drug outpatient treatment completion rate per 100 admissions 2003-04                                                                                      | 55.6%                | 58.4%                    | 43.7% - 72.6% |
| <i>Primary Health Services</i>                                                                                                                                                 |                      |                          |               |
| 2.2.9.1. Percentage of the population served by primary health care teams March 2005                                                                                           | 13.80%               | 23.89%                   | 0% - 100%     |
| 2.2.9.3. Total number of new primary health care teams in the current fiscal year 2004-05                                                                                      | 1                    | n/a                      | n/a           |
| 2.2.9.4. Regional Operational / Budget Plan includes an updated Primary Health Care Plan that identifies the locations of primary health care teams 2004-05 [yes/no indicator] | Yes                  | n/a                      | n/a           |
| 2.2.9.5. Regional Operational / Budget Plan includes an updated Diabetes Management Plan 2004-05 [yes/no indicator]                                                            | Yes                  | n/a                      | n/a           |
| 2.2.9.6. Regional Operational / Budget Plan outlines potential financial requirements 2004-05 [yes/no indicator]                                                               | Yes                  | n/a                      | n/a           |
| 2.2.9.7. Regional Health Authorities participated in 3-year and 5-year evaluations of demonstration sites, as required 2004-05 [yes/no indicator]                              | Yes                  | n/a                      | n/a           |



| Indicator                                                                                                                                                        | Prairie North<br>RHA | Provincial<br>Comparison | Range         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------|---------------|
| <i><u>Emergency Response Services</u></i>                                                                                                                        |                      |                          |               |
| 2.2.10.1. Percentage of ambulance calls responded to where at least one of the emergency medical service providers has at least basic-EMT level training 2003-04 | 98.77%               | 98.76%                   | 70.17% - 100% |
| <i><u>Mental Health and Addiction Services</u></i>                                                                                                               |                      |                          |               |
| 2.2.11.2. Mental health inpatient readmission rate per 100 mental health inpatients 2003-04                                                                      | 19.7%                | 20.2%                    | 17.9% - 26.3% |
| 2.2.11.3. Alcohol and drug inpatient treatment completion rate per 100 admissions 2003-04                                                                        | 79.4%                | 68.2%                    | 62.3% - 79.4% |
| <i><u>Program Support Services</u></i>                                                                                                                           |                      |                          |               |
| 2.2.13.1. Administrative expenditures in program support funding pool as a percentage of overall base operating funds 2004-05                                    | 4.2%                 | n/a                      | 3.6% - 11.5%  |
| <b>Health Status and Outcome Indicators</b>                                                                                                                      |                      |                          |               |
| 3.1.1.1. Infant mortality rate per 1,000 live births 1998-2002                                                                                                   | 7.15                 | 6.24                     | 1.70 - 15.66  |
| 3.1.1.2.a Low birth weight rate per 100 live births 1998-2002                                                                                                    | 5.28                 | 5.26                     | 4.34 - 6.19   |
| 3.1.1.2.b High birth weight rate per 100 live births 1998-2002                                                                                                   | 16.6                 | 15.7                     | 13.1 - 26.7   |
| 3.1.1.4.a Disability-free life expectancy (at birth) MALES 1996                                                                                                  | 64.7                 | 66.6                     | 61.8 - 69.2   |
| Disability-free life expectancy (at birth) FEMALES 1996                                                                                                          | 69.2                 | 70.0                     | 63.2 - 72.5   |

| Indicator                                                                                                                                        | Prairie North<br>RHA | Provincial<br>Comparison | Range         |
|--------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------|---------------|
| 3.1.1.4.b Disability-free life expectancy (at age 65 years) MALES 1996                                                                           | 11.1                 | 11.2                     | 8.7 - 12.1    |
| Disability-free life expectancy (at age 65 years) FEMALES 1996                                                                                   | 12.5                 | 12.7                     | 8.4 - 13.2    |
| 3.1.1.5.a Life expectancy (at birth) MALES 2001                                                                                                  | 76.0                 | 76.2                     | 72.1 - 78.2   |
| Life expectancy (at birth) FEMALES 2001                                                                                                          | 80.8                 | 81.8                     | 76.1 - 82.8   |
| 3.1.1.5.b Life expectancy (at age 65 years) MALES 2001                                                                                           | 16.8                 | 16.9                     | 15.6 - 18.0   |
| Life expectancy (at age 65 years) FEMALES 2001                                                                                                   | 20.0                 | 20.9                     | 17.2 - 21.8   |
| 3.1.1.6. Self-rated health status: percentage of population (age 12 years and over) who report their health as very good or excellent 2003       | 61.8%                | 59.5%                    | 47.6% - 63.7% |
| 3.1.1.7. Percentage of population (age 12 years and over) who are current, daily or occasional smokers MALES 2003                                | 24.5%                | 24.6%                    | 20.8% - 40.7% |
| Percentage of population (age 12 years and over) who are current, daily or occasional smokers FEMALES 2003                                       | 26.7%                | 23.1%                    | 11.6% - 42.0% |
| 3.1.1.8.a Percentage of population (age 18 to 64 years) who are overweight (BMI 25.0-29.9) 2003                                                  | 39.1%                | 35.8%                    | 31.7% - 41.8% |
| 3.1.1.8.b Percentage of population (age 18 to 64 years) who are obese (BMI 30.0+) 2003                                                           | 24.9%                | 20.5%                    | 16.4% - 27.2% |
| 3.1.1.10.a Percentage of population (age 12 years and over) who report physical activity participation levels of active / moderately active 2003 | 52.4%                | 49.8%                    | 41.7% - 56.1% |



| Indicator                                                                                                                      | Prairie North<br>RHA | Provincial<br>Comparison | Range        |
|--------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------|--------------|
| 3.1.1.10.b Percentage of population (age 12 years and over) who report physical activity participation levels of inactive 2003 | 45.5%                | 47.8%                    | 41.0%– 56.4% |
| 3.1.1.12. Age-adjusted diabetes prevalence rate per 1,000 population 2001-02                                                   | 44.3                 | n/a                      | 29.5 – 72.5  |
| 3.1.1.13. Injury hospitalization rate per 1,000 population (age 0 to 19 years) MALES 2002-03                                   | 8.7                  | 9.3                      | 6.7 – 17.6   |
| Injury hospitalization rate per 1,000 population (age 0 to 19 years) FEMALES 2002-03                                           | 6.3                  | 6.5                      | 4.6 – 12.0   |
| 3.1.1.14. Hospitalization rate due to falls per 1,000 population (age 65 years and over) MALES 2002-03                         | 12.7                 | 13.4                     | 3.6 – 20.2   |
| Hospitalization rate due to falls per 1,000 population (age 65 years and over) FEMALES 2002-03                                 | 21.0                 | 25.1                     | 0.0 – 35.0   |

\* NOTE: Indicators 2.1.1.8; 2.1.1.9; 2.1.1.11; 2.1.1.12; and 2.1.1.17 do not include data for CUPE-Alberta and UNA Alberta employees of Prairie North Health Region.

\* NOTE: Indicators 2.2.2.3.a; 2.2.2.3.b; and 2.2.2.4 are based on April 25, 2005 Surgical Registry data. Data for these indicators from Prairie North Health Region is provisional as of April 25, 2005.



## Management Report

May 13, 2005

### PRAIRIE NORTH HEALTH REGION REPORT OF MANAGEMENT

The accompanying financial statements are the responsibility of management of Prairie North Regional Health Authority. These financial statements have been prepared in accordance with Canadian Generally Accepted Accounting Principles and the Financial Reporting Guide issued by Saskatchewan Health, and where appropriate, reflect estimates based on judgment. The financial information presented in this annual report is consistent with that in the financial statements.

Management maintains appropriate systems of internal control, including policies and procedures, which provide reasonable assurance that the Region's assets are safeguarded and the financial records are accurate and reliable.

The Board of Directors is responsible for reviewing the financial statements and overseeing management's performance in financial reporting. The Board of Directors meets with management and the external auditors to discuss and review financial matters. The Board of Directors approves the financial statements and the annual report.

The appointed auditor conducts an independent audit of the financial statements and has full and open access to the records, management and Board of Directors of the Authority. The auditor's report expresses an opinion on the fairness of the financial statements prepared by management.

A handwritten signature in black ink, appearing to read "David Fan".

David Fan  
Chief Executive Officer

A handwritten signature in black ink, appearing to read "Jerry Keller".

Jerry Keller  
Chief Financial Officer





## Financial Summaries

# Deloitte.

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### AUDITORS' REPORT

TO THE BOARD OF DIRECTORS OF  
PRAIRIE NORTH REGIONAL HEALTH AUTHORITY

TO THE MEMBERS OF THE LEGISLATIVE ASSEMBLY

We have audited the statement of financial position of Prairie North Regional Health Authority (the "Authority") as at March 31, 2005 and the statement of operations and changes in fund balances and of cash flows for the year then ended. These financial statements are the responsibility of the Authority's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Authority as at March 31, 2005 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

*Deloitte & Touche LLP*

Chartered Accountants

Saskatoon, Saskatchewan  
May 13, 2005

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**STATEMENT OF FINANCIAL POSITION**  
as at March 31, 2005

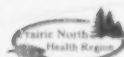
|                                               | Operating<br>Fund    | Restricted Funds     |                         | Total<br>2005        | Total<br>2004<br>(Note 10) |
|-----------------------------------------------|----------------------|----------------------|-------------------------|----------------------|----------------------------|
|                                               |                      | Capital<br>Fund      | Community<br>Trust Fund |                      |                            |
| <b>ASSETS</b>                                 |                      |                      |                         |                      |                            |
| <b>Current assets</b>                         |                      |                      |                         |                      |                            |
| Cash and short-term investments (Schedule 2)  | \$ 10,040,715        | \$ 4,808,597         | \$ 2,483,160            | \$ 17,332,472        | \$ 10,513,901              |
| Accounts receivable                           |                      |                      |                         |                      |                            |
| Saskatchewan Health - General Revenue Fund    | 305,856              | -                    | -                       | 305,856              | 2,214,809                  |
| Other                                         | 1,462,090            | 335,519              | 1,638                   | 1,799,247            | 2,697,788                  |
| Inventory                                     | 1,570,399            | -                    | -                       | 1,570,399            | 1,577,131                  |
| Prepaid expenses                              | 1,289,356            | -                    | -                       | 1,289,356            | 1,209,415                  |
|                                               | 14,668,416           | 5,144,116            | 2,484,798               | 22,297,330           | 18,213,044                 |
| Investments (Schedule 2)                      |                      |                      |                         |                      |                            |
| Market (\$2,790,248; 2004 - \$2,688,777)      | 1,791,211            | 855,234              | -                       | 2,646,445            | 2,485,023                  |
| Capital assets (Note 3)                       | -                    | 43,987,263           | -                       | 43,987,263           | 47,013,263                 |
| <b>TOTAL ASSETS</b>                           | <b>\$ 16,459,627</b> | <b>\$ 49,986,613</b> | <b>\$ 2,484,798</b>     | <b>\$ 68,931,038</b> | <b>\$ 67,711,330</b>       |
| <b>LIABILITIES AND FUND BALANCES</b>          |                      |                      |                         |                      |                            |
| <b>Current liabilities</b>                    |                      |                      |                         |                      |                            |
| Accounts payable                              | \$ 3,569,784         | \$ 43,562            | \$ 12,923               | \$ 3,626,269         | \$ 5,472,981               |
| Accrued salaries payable                      | 3,582,163            | -                    | -                       | 3,582,163            | 2,771,491                  |
| Accrued vacation payable                      | 7,636,151            | -                    | -                       | 7,636,151            | 7,011,243                  |
| Current portion of mortgages payable (Note 5) | -                    | 392,884              | -                       | 392,884              | 309,224                    |
| Deferred revenue (Note 6)                     | 1,850,352            | -                    | -                       | 1,850,352            | 1,360,330                  |
|                                               | 16,638,450           | 436,446              | 12,923                  | 17,087,819           | 16,925,269                 |
| Mortgages payable (Note 5)                    | -                    | 6,330,685            | -                       | 6,330,685            | 6,411,092                  |
| <b>TOTAL LIABILITIES</b>                      | <b>16,638,450</b>    | <b>6,767,131</b>     | <b>12,923</b>           | <b>23,418,504</b>    | <b>23,336,361</b>          |
| <b>Fund balances:</b>                         |                      |                      |                         |                      |                            |
| Invested in capital assets                    | -                    | 37,263,694           | -                       | 37,263,694           | 40,292,947                 |
| Externally restricted (Schedule 3)            | -                    | -                    | 2,471,875               | 2,471,875            | 2,433,935                  |
| Internally restricted (Schedule 4)            | 297,044              | 5,955,788            | -                       | 6,252,832            | 2,332,383                  |
| Unrestricted                                  | (475,867)            | -                    | -                       | (475,867)            | (684,296)                  |
| <b>TOTAL FUND BALANCES</b>                    | <b>(178,823)</b>     | <b>43,219,482</b>    | <b>2,471,875</b>        | <b>45,512,534</b>    | <b>44,374,969</b>          |
| <b>TOTAL LIABILITIES AND FUND BALANCES</b>    | <b>\$ 16,459,627</b> | <b>\$ 49,986,613</b> | <b>\$ 2,484,798</b>     | <b>\$ 68,931,038</b> | <b>\$ 67,711,330</b>       |

See accompanying notes

APPROVED BY THE BOARD

..... Director

..... Director





**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**STATEMENT OF OPERATIONS AND CHANGES IN FUND BALANCES**  
for the year ended March 31, 2005

|                                              | Operating Fund              |                    |                    | Restricted Funds        |                                 |                  | Total<br>2004    |
|----------------------------------------------|-----------------------------|--------------------|--------------------|-------------------------|---------------------------------|------------------|------------------|
|                                              | Budget<br>2005<br>(Note 12) | 2005               | 2004<br>(Note 10)  | Capital<br>Fund<br>2005 | Community<br>Trust Fund<br>2005 | Total<br>2005    |                  |
| <b>REVENUES</b>                              |                             |                    |                    |                         |                                 |                  |                  |
| Saskatchewan Health - General Revenue        | \$ 105,879,678              | \$ 105,602,568     | \$ 101,673,788     | \$ 5,470,132            | \$ -                            | \$ 5,470,132     | \$ 2,163,285     |
| Other Provincial Revenue                     | 592,258                     | 595,682            | 557,577            | -                       | -                               | -                | -                |
| Federal Government Revenue                   | 211,200                     | 224,324            | 140,432            | 150,360                 | -                               | 150,360          | 154,844          |
| Funding from Other Provinces                 | 14,883,420                  | 15,049,620         | 12,798,997         | 164,295                 | -                               | 164,295          | -                |
| Special Funded Programs                      | 2,511,996                   | 2,300,976          | 1,929,669          | -                       | -                               | -                | -                |
| Patient Fees                                 | 9,219,500                   | 9,463,017          | 9,004,224          | -                       | -                               | -                | -                |
| Out of Province Revenue (Reciprocal)         | 1,005,300                   | 1,160,806          | 1,000,805          | -                       | -                               | -                | -                |
| Out of Country Revenue                       | 18,200                      | 40,478             | 7,484              | -                       | -                               | -                | -                |
| Donations                                    | 102,000                     | 355,375            | 174,296            | 586,800                 | 3,564                           | 590,364          | 845,017          |
| Investment Income                            | 260,000                     | 284,378            | 356,900            | 44,188                  | 61,118                          | 105,306          | 118,426          |
| Ancillary Revenue                            | 193,400                     | 335,600            | 1,104,942          | -                       | -                               | -                | -                |
| Recoveries                                   | 1,934,294                   | 1,982,414          | 1,111,141          | -                       | -                               | -                | -                |
| Other Revenue                                | 232,000                     | 298,425            | 348,141            | 5,522                   | 6,061                           | 11,583           | 2,436            |
| <b>TOTAL REVENUES</b>                        | <b>137,043,246</b>          | <b>137,693,663</b> | <b>130,208,396</b> | <b>6,421,297</b>        | <b>70,743</b>                   | <b>6,492,040</b> | <b>3,284,008</b> |
| <b>EXPENSES</b>                              |                             |                    |                    |                         |                                 |                  |                  |
| Province Wide Acute Care Services            | 15,832,283                  | 15,724,027         | 15,367,760         | 23,298                  | -                               | 23,298           | 14,349           |
| Acute Care Services                          | 43,845,861                  | 44,792,967         | 42,342,108         | 3,656,706               | -                               | 3,656,706        | 3,528,396        |
| Physician Compensation - Acute Care Services | 4,406,900                   | 4,224,802          | 4,029,743          | -                       | -                               | -                | -                |
| Supportive Care Services                     | 34,629,561                  | 35,410,204         | 33,735,898         | 1,293,379               | 32,803                          | 1,326,182        | 1,529,020        |
| Home Based Service - Supportive Care         | 5,185,081                   | 5,119,522          | 4,887,742          | 23,504                  | -                               | 23,504           | 31,429           |
| Population Health Services                   | 3,714,738                   | 3,567,959          | 3,540,336          | 11,912                  | -                               | 11,912           | 15,939           |
| Community Care Services                      | 7,123,820                   | 6,644,615          | 6,258,640          | -                       | -                               | -                | -                |
| Home Based Services - Acute & Palliative     | 1,197,555                   | 1,193,790          | 1,112,850          | -                       | -                               | -                | -                |
| Primary Health Care Services                 | 4,450,374                   | 4,834,275          | 3,527,981          | 695,701                 | -                               | 695,701          | 171,376          |
| Emergency Response Services                  | 3,331,773                   | 3,435,620          | 3,264,187          | 91,606                  | -                               | 91,606           | 79,844           |
| Mental Health Services - Inpatient           | 1,868,139                   | 1,723,086          | 1,554,800          | 783                     | -                               | 783              | 995              |
| Addiction Services - Residential             | 609,880                     | 628,355            | 617,564            | 7,345                   | -                               | 7,345            | 1,487            |
| Physician Compensation                       | 1,840,800                   | 1,836,132          | 1,583,632          | -                       | -                               | -                | -                |
| Program Support Services                     | 6,231,968                   | 5,729,056          | 6,147,208          | 58,632                  | -                               | 58,632           | 57,609           |
| Special Funded Programs                      | 2,543,700                   | 2,267,174          | 2,019,464          | 5,890                   | -                               | 5,890            | 5,890            |
| Ancillary                                    | 221,600                     | 155,866            | 195,862            | -                       | -                               | -                | 25,770           |
| <b>TOTAL EXPENSES (Schedule 1)</b>           | <b>137,034,033</b>          | <b>137,287,450</b> | <b>130,185,775</b> | <b>5,868,756</b>        | <b>32,803</b>                   | <b>5,901,559</b> | <b>5,462,104</b> |
| <b>EXCESS (DEFICIENCY) OF</b>                |                             |                    |                    |                         |                                 |                  |                  |
| <b>REVENUES OVER EXPENSES</b>                | \$ 9,213                    | 406,213            | 22,621             | 552,541                 | 37,940                          | 590,481          | (2,178,096)      |
| Fund balances, beginning of year             |                             | (619,096)          | (644,673)          | 42,560,130              | 2,433,935                       | 44,994,065       | 47,175,117       |
| Interfund transfers (Note 14)                |                             | 34,060             | 2,956              | (34,060)                | -                               | (34,060)         | (2,956)          |
| Correction of error (Note 19)                |                             | -                  | -                  | 140,871                 | -                               | 140,871          | -                |
| <b>FUND BALANCES, END OF YEAR</b>            |                             | \$ (178,823)       | \$ (619,096)       | \$ 43,219,482           | \$ 2,471,875                    | \$ 45,691,357    | \$ 44,994,065    |

See accompanying notes

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**STATEMENT OF CASH FLOWS**  
for the year ended March 31, 2005

|                                                                            | Operating Fund       |                     | Restricted Funds                   |                         |                     |                     |
|----------------------------------------------------------------------------|----------------------|---------------------|------------------------------------|-------------------------|---------------------|---------------------|
|                                                                            | 2005                 | 2004<br>(Note 10)   | Capital<br>Fund                    | Community<br>Trust Fund | 2005                | 2004<br>(Note 10)   |
| Cash (used in) provided by:                                                | Operating Activities |                     | Financing and Investing Activities |                         |                     |                     |
| Excess (deficiency) of revenues over expenses                              | \$ 406,213           | \$ 22,621           | \$ 552,541                         | \$ 37,940               | \$ 590,481          | \$ (2,178,096)      |
| Amortization                                                               | -                    | -                   | 5,473,449                          | -                       | 5,473,449           | 5,039,386           |
| Gain on sale of capital assets                                             | -                    | -                   | (2,422)                            | -                       | (2,422)             | -                   |
| Net change in non-cash working capital (Note 7)                            | 2,547,442            | (273,996)           | 252,795                            | 12,938                  | 265,733             | (668,766)           |
|                                                                            | 2,953,655            | (251,375)           | 6,276,363                          | 50,878                  | 6,327,241           | 2,192,524           |
| Purchase of capital assets                                                 | -                    | -                   | (2,485,027)                        | -                       | (2,485,027)         | (3,068,725)         |
| Proceeds on sale of capital assets                                         | -                    | -                   | 40,000                             | -                       | 40,000              | -                   |
| Sale (purchase) of long-term investments                                   | (88,615)             | 8,288               | (72,807)                           | -                       | (72,807)            | 395,434             |
|                                                                            | (88,615)             | 8,288               | (2,517,834)                        | -                       | (2,517,834)         | (2,673,291)         |
| Acquisition of debt                                                        | -                    | -                   | 331,730                            | -                       | 331,730             | 465,000             |
| Repayment of debt                                                          | -                    | -                   | (328,477)                          | -                       | (328,477)           | (257,643)           |
|                                                                            | -                    | -                   | 3,253                              | -                       | 3,253               | 207,357             |
| Net (decrease) increase in cash and short-term investments during the year | 2,865,040            | (243,087)           | 3,761,782                          | 50,878                  | 3,812,660           | (273,410)           |
| Cash and short-term investments beginning of year                          | 7,141,615            | 7,381,746           | 940,004                            | 2,432,282               | 3,372,286           | 3,648,652           |
| Interfund transfers (Note 14)                                              | 34,060               | 2,956               | (34,060)                           | -                       | (34,060)            | (2,956)             |
| Correction of error (Note 19)                                              | -                    | -                   | 140,871                            | -                       | 140,871             | -                   |
| <b>CASH AND SHORT-TERM INVESTMENTS, END OF YEAR (Schedule 2)</b>           | <b>\$ 10,040,715</b> | <b>\$ 7,141,615</b> | <b>\$ 4,808,597</b>                | <b>\$ 2,483,160</b>     | <b>\$ 7,291,757</b> | <b>\$ 3,372,286</b> |
| <b>Supplementary Information:</b>                                          |                      |                     |                                    |                         |                     |                     |
| Cash interest paid                                                         | \$ -                 | \$ -                | \$ 393,489                         | \$ -                    | \$ 393,489          | \$ 388,598          |

See accompanying notes



**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
 year ended March 31, 2005

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**1. LEGISLATIVE AUTHORITY**

On August 1, 2002, the Legislative Assembly passed *The Regional Health Services Act* (the "Act"). This Act created the Prairie North Regional Health Authority (the "Authority"). The Authority is responsible for the planning, organization, delivery and evaluation of health services within the geographical area known as the Prairie North Health Region.

On coming into force, the Act terminated the membership of the individual District Health Boards. All assets, liabilities, rights, and obligations of the District Health Boards continue as the assets, liabilities, rights, and obligations of the Regional Health Authority. All contracts with the District Health Boards remain in effect until repealed or replaced by the Regional Health Authorities.

The Authority was created by the Act. The Authority is responsible for the planning, organization, delivery, and evaluation of health services it is to provide (The Act sec 27) within the geographic area known as the Prairie North Health Region.

**2. SIGNIFICANT ACCOUNTING POLICIES**

These financial statements have been prepared in accordance with Canadian generally accepted accounting principles and include the following significant accounting policies:

*Health Care Organizations*

- i) The Authority has agreements with and grants funding to the following Community Based Organizations (CBOs) and third parties to provide health services:

Edwards Society Inc.  
 Libbie Young Centre Inc.  
 Walter A. "Slim" Thorpe Centre Inc.  
 Portage Vocational Society Inc.  
 Canadian Mental Health Association (Saskatchewan Division) Inc.

Note 9 i) provides disclosure of payments to CBOs and third parties.

- ii) The following affiliate is incorporated under the Non-Profit Corporations Act and is a registered charity under the Income Tax Act:

Societe Joseph Breton Inc.

The Authority has entered into an affiliation agreement with and provides annual grant funding to this organization for the delivery of health care services. Consequently, the Authority has disclosed certain financial information regarding these affiliates.

This affiliate is not consolidated into the Authority financial statements. Alternatively, Note 9 ii) describes the financial position and results of operations of the affiliate.

- iii) The Lloydminster Region Health Care Foundation Inc., Battlefords Union Hospital Foundation Inc., Meadow Lake Hospital Foundation Inc. and Twin Rivers Health Care Foundation Inc. are incorporated under The Non-Profit Corporations Act and are registered charities under The Income Tax Act.

These financial statements do not include the financial activities of the Foundations. Alternatively, Note 9 iii) provides supplementary financial information of the Foundations.

PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
NOTES TO THE FINANCIAL STATEMENTS  
year ended March 31, 2005

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2. SIGNIFICANT ACCOUNTING POLICIES (continued)

*Fund Accounting*

The accounts of the Authority are maintained in accordance with the restricted fund method of accounting for contributions. For financial reporting purposes, accounts with similar characteristics have been combined into the following major funds:

(i) Operating fund

The operating fund reflects the primary operations of the Authority including revenues received for provision of health services from Saskatchewan Health - General Revenue Fund, Alberta Health - General Revenue Fund and billings to patients, clients, the federal government and other agencies for patient and client services. Other revenue consists of donations, recoveries, and ancillary revenue. Expenses are for the delivery of health services.

(ii) Capital fund

The capital fund is a restricted fund that reflects the equity of the Authority in capital assets after taking into consideration any associated long-term debt. The capital fund includes revenues received from Saskatchewan Health - General Revenue Fund designated for the acquisition of capital assets. The capital fund also includes donations designated for capital purposes by the contributor. Expenses consist primarily of amortization of capital assets.

(iii) Community Trust fund

The community trust fund is a restricted fund that reflects community generated assets transferred to the Authority in accordance with the pre-amalgamation agreements signed with the amalgamating health corporations. The assets include cash and investments initially accumulated by the health corporations in the Authority from donations or municipal tax levies. These assets are accounted for separately and use of the assets is subject to restrictions set out in pre-amalgamation agreements between the Authority and the health corporations.

*Revenue*

Unrestricted contributions are recognized as revenue in the Operating Fund in the year received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Restricted contributions related to general operations are recognized as revenue of the Operating Fund in the year in which the related expenses are incurred. All other restricted contributions are recognized as revenue of the appropriate restricted fund.

*Capital Assets*

Capital assets are recorded at cost. Normal maintenance and repairs are expensed as incurred. Capital assets, with a life exceeding one year, are amortized on a straight-line basis over their estimated useful lives as follows:

|                        |             |
|------------------------|-------------|
| Land improvements      | 2 ½% to 20% |
| Leasehold improvements | 20%         |
| Buildings              | 2 ½% to 20% |
| Equipment              | 5% to 100%  |





**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**2. SIGNIFICANT ACCOUNTING POLICIES (continued)**

*Capital Assets (continued)*

Donated capital assets are recorded at their fair value at the date of contribution (if fair value can be reasonably determined).

Transfers of capital assets from a related party are to be recorded at the asset carrying amounts.

*Inventory*

Inventory consists of general stores, pharmacy, laboratory, linen and other. All inventories are valued at cost as determined on an average cost basis.

*Investments*

Investments are valued at the lower of cost or net realizable value.

*Pension*

Employees of the Authority participate in several multi-employer defined benefit pension plans or a defined contribution plan. The Authority follows defined contribution plan accounting for its participation in the plans. Accordingly, the Authority expenses all contributions it is required to make in the year.

*Measurement Uncertainty*

The financial statements have been prepared by management in accordance with Canadian generally accepted accounting principles. In the preparation of financial statements, management makes various estimates and assumptions in determining the reported amounts of assets and liabilities, revenues and expenses and in the disclosure of commitments and contingencies. Changes in estimates and assumptions will occur based on the passage of time and the occurrence of certain future events. The changes will be reported in the period in which they become known.

**3. CAPITAL ASSETS**

|                             | 2005                  |                             |                      | 2004                 |
|-----------------------------|-----------------------|-----------------------------|----------------------|----------------------|
|                             | Cost                  | Accumulated<br>Amortization | Net Book<br>Value    | Net Book<br>Value    |
| Land                        | \$ 1,595,364          | \$ -                        | \$ 1,595,364         | \$ 1,595,364         |
| Land improvements           | 1,635,740             | 1,394,784                   | 240,956              | 269,186              |
| Leasehold<br>improvements   | 25,105                | 15,778                      | 9,327                | 14,413               |
| Buildings                   | 77,155,997            | 41,527,151                  | 35,628,846           | 38,611,112           |
| Equipment                   | 36,067,848            | 30,023,897                  | 6,043,951            | 6,494,119            |
| Construction in<br>progress | 468,819               | -                           | 468,819              | 29,069               |
|                             | <u>\$ 116,948,873</u> | <u>\$ 72,961,610</u>        | <u>\$ 43,987,263</u> | <u>\$ 47,013,263</u> |

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**4. COMMITMENTS**

*Capital Assets Acquisitions*

At March 31, 2005, commitments for acquisition of capital assets were \$81,392 (2004 - \$364,000).

*Operating Leases*

The Authority leases premises from Saskatchewan Property Management Corporation (SPMC) under an agreement that expires December 31, 2006. In keeping with the sublessor's policy of "cost recovery", the monthly rental is subject to an adjustment effective the first day of April during each year of the term. The current monthly charge is \$16,781 plus GST.

The Authority's intention is to terminate the lease in the coming year. Although the obligation continues to December, 2006, the Authority and SPMC are making a collaborative effort to sub-lease the premises. Land and building have been purchased to replace the leased property.

Other minimum annual rental payments under operating leases on property and equipment over the next five years are as follows:

|      |    |         |
|------|----|---------|
| 2006 | \$ | 161,527 |
| 2007 |    | 161,527 |
| 2008 |    | 161,527 |
| 2009 |    | 161,527 |
| 2010 |    | 161,527 |

**5. MORTGAGES PAYABLE**

| Title of Issue                                                    | Interest Rate | Annual Repayment Terms                                                                                                                                                                    | 2005         | 2004         |
|-------------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------|
| Cut Knife & District Special Care Home<br>CMHC, due March 1, 2022 | 5.050%        | \$98,741 principal and interest, of which \$33,768 is subsidized by Saskatchewan Housing Corporation. Yielding an effective interest rate of 2.15%. Mortgage renewal date - March 1, 2007 | \$ 1,129,502 | \$ 1,170,787 |
| L. Gervais Memorial Health Centre<br>CMHC, due February 1, 2022   | 6.870%        | \$51,192 principal and interest, of which \$22,273 is subsidized by Saskatchewan Housing Corporation. Yielding an effective interest rate of 2.62%. Mortgage renewal date - June 1, 2005  | 514,355      | 530,191      |
| Subtotal                                                          |               |                                                                                                                                                                                           | 1,643,857    | 1,700,978    |





**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**5. MORTGAGES PAYABLE (continued)**

| Title of Issue                                                          | Interest Rate | Annual Repayment Terms                                                                                                                                                                        | 2005         | 2004         |
|-------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------|
| Balance forward                                                         |               |                                                                                                                                                                                               | \$ 1,643,857 | \$ 1,700,978 |
| Lakeland Lodge, St. Walburg CMHC, due March 1, 2026                     | 8.000%        | \$32,973 principal and interest. Mortgage renewal date - March 1, 2026                                                                                                                        | 338,289      | 344,376      |
| Lloydminster & District Senior Citizens Lodge CMHC due December 1, 2020 | 5.140%        | \$179,634 principal and interest, of which \$58,105 is subsidized by Saskatchewan Housing Corporation. Yielding an effective interest rate of 2.11%. Mortgage renewal date - December 1, 2013 | 1,943,594    | 2,022,400    |
| Northland Pioneer Lodge, Meadow Lake CMHC, due January 1, 2017          | 5.375%        | \$8,521 principal and interest. Mortgage renewal date - January 1, 2017                                                                                                                       | 74,728       | 79,149       |
| Northland Pioneer Lodge, Meadow Lake CMHC due April 1, 2022             | 5.790%        | \$95,386 principal and interest, of which \$35,764 is subsidized by Saskatchewan Housing Corporation. Yielding an effective interest rate of 2.42%. Mortgage renewal date - March 1, 2007     | 1,038,326    | 1,073,336    |
| The Battlefords River Heights Lodge Corp. CMHC, due January 1, 2017     | 5.375%        | \$12,470 principal and interest. Mortgage renewal date - January 1, 2017                                                                                                                      | 109,352      | 115,822      |
| The Battlefords River Heights Lodge Corp. CMHC, due November 1, 2027    | 8.000%        | \$76,047 principal and interest. Mortgage renewal date - November 1, 2027                                                                                                                     | 803,027      | 815,345      |
| Subtotal                                                                |               |                                                                                                                                                                                               | 5,951,173    | 6,151,406    |

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**5. MORTGAGES PAYABLE (continued)**

| Title of Issue                                                                                                          | Interest Rate | Annual Repayment Terms                                                          | 2005                | 2004                |
|-------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------|---------------------|---------------------|
| Balance forward                                                                                                         |               |                                                                                 | \$ 5,951,173        | \$ 6,151,406        |
| Turtle River Nursing Home,<br>Turtleford<br>CMHC, due December 1, 2026                                                  | 8.000%        | \$15,736 principal and interest.<br>Mortgage renewal date -<br>December 1, 2026 | 163,652             | 166,391             |
| Prairie North Regional Health<br>Authority, Home Care<br>Building<br>Lloydminster Credit Union,<br>due August 1, 2008   | 5.800%        | \$131,255 principal and interest.<br>Mortgage renewal date -<br>August 1, 2008  | 398,040             | 402,519             |
| Prairie North Regional Health<br>Authority, Home Care<br>Building<br>Lloydminster Credit Union,<br>due December 1, 2011 | 4.250%        | \$19,830 principal and interest.<br>Mortgage renewal date -<br>December 1, 2011 | 210,704             | -                   |
|                                                                                                                         |               |                                                                                 | <u>6,723,569</u>    | <u>6,720,316</u>    |
| Less current portion                                                                                                    |               |                                                                                 | <u>392,884</u>      | <u>309,224</u>      |
|                                                                                                                         |               |                                                                                 | <u>\$ 6,330,685</u> | <u>\$ 6,411,092</u> |

For each of the mortgages, the Authority has pledged the related buildings of the special care homes as security.

Principal repayments required in each of the next five years are estimated as follows:

|                     |                     |
|---------------------|---------------------|
| 2006                | \$ 392,884          |
| 2007                | 415,674             |
| 2008                | 432,380             |
| 2009                | 292,038             |
| 2010                | 265,715             |
| 2011 and subsequent | <u>4,924,878</u>    |
|                     | <u>\$ 6,723,569</u> |





**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**6. DEFERRED REVENUE**

|                                               | Balance,<br>beginning<br>of year | Less<br>amount<br>recognized<br>from Health | Add<br>amount<br>received<br>from Health | Less<br>amount<br>recognized<br>from other<br>sources | Add<br>amount<br>received<br>from other<br>sources | Balance,<br>end<br>of year |
|-----------------------------------------------|----------------------------------|---------------------------------------------|------------------------------------------|-------------------------------------------------------|----------------------------------------------------|----------------------------|
| Saskatchewan Health -<br>General Revenue Fund |                                  |                                             |                                          |                                                       |                                                    |                            |
| Health improvement<br>initiatives             | \$ 258,287                       | \$ 232,793                                  | \$ -                                     | \$ -                                                  | \$ -                                               | \$ 25,494                  |
| Work Place Wellness                           | 267,906                          | 41,662                                      | -                                        | -                                                     | -                                                  | 226,244                    |
| Other                                         | 403,305                          | 982,953                                     | 1,941,702                                | -                                                     | -                                                  | 1,362,054                  |
| Other revenue received<br>in advance          | 430,832                          | 1,500                                       | -                                        | 2,108,356                                             | 1,915,584                                          | 236,560                    |
|                                               | <u>\$ 1,360,330</u>              | <u>\$ 1,258,908</u>                         | <u>\$ 1,941,702</u>                      | <u>\$ 2,108,356</u>                                   | <u>\$ 1,915,584</u>                                | <u>\$ 1,850,352</u>        |

Restricted funding related to general operations from Saskatchewan Health – General Revenue Fund and other revenue is recorded as revenue as the related costs are incurred.

**7. NET CHANGE IN NON-CASH WORKING CAPITAL**

|                                                       | Operating Fund      |                     | Restricted Funds  |                         |                   |                     |
|-------------------------------------------------------|---------------------|---------------------|-------------------|-------------------------|-------------------|---------------------|
|                                                       | 2005                | 2004                | Capital<br>Fund   | Community<br>Trust Fund | Total<br>2005     | Total<br>2004       |
| (Increase) decrease in<br>accounts receivable         | \$ 2,269,873        | \$ (685,397)        | \$ 537,606        | \$ 15                   | \$ 537,621        | \$ (736,688)        |
| (Increase) decrease in<br>inventory                   | 6,732               | (85,399)            | -                 | -                       | -                 | -                   |
| Increase in prepaids                                  | (79,941)            | (247,559)           | -                 | -                       | -                 | -                   |
| Increase (decrease) in<br>accounts payable            | (1,574,824)         | 2,266,570           | (284,811)         | 12,923                  | (271,888)         | 67,922              |
| Increase (decrease) in<br>accrued salaries<br>payable | 810,672             | (354,143)           | -                 | -                       | -                 | -                   |
| Increase in accrued<br>vacation payable               | 624,908             | 192,821             | -                 | -                       | -                 | -                   |
| Decrease (increase) in<br>deferred revenue            | - 490,022           | (1,360,889)         | -                 | -                       | -                 | -                   |
|                                                       | <u>\$ 2,547,442</u> | <u>\$ (273,996)</u> | <u>\$ 252,795</u> | <u>\$ 12,938</u>        | <u>\$ 265,733</u> | <u>\$ (668,766)</u> |

**8. PATIENT AND RESIDENT TRUST ACCOUNTS**

The Authority administers funds for patients and residents using the Authority's facilities. The funds are held in separate accounts for the residents at each facility. The total cash held in trust as at March 31, 2005 was \$534,151 (2004 - \$549,567). These amounts are not reflected in the financial statements.

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**9. RELATED PARTIES**

These financial statements include transactions with related parties. The Authority is related to all Saskatchewan Crown Agencies such as departments, corporations, boards and commissions under the common control of the Government of Saskatchewan. The Authority is also related to non-Crown enterprises that the Government jointly controls or significantly influences. In addition, the Authority is related to other non-Government organizations by virtue of its economic interest in these organizations.

Transactions with these related parties are in the normal course of operations. Amounts due to or from and the recorded amounts resulting from these transactions are included in the financial statements and the table below. They are recorded at the standard rates charged by those organizations and are settled on normal trade terms.

|                                                                         | 2005                 | 2004                 |
|-------------------------------------------------------------------------|----------------------|----------------------|
| <b>Related party expenses</b>                                           |                      |                      |
| Public Employees Superannuation (Benefits)                              | \$ 767,295           | \$ 777,040           |
| Public Service Superannuation (Benefits)                                | 296,630              | 309,900              |
| Saskatchewan Workers' Compensation Board (Benefits)                     | 1,788,889            | 1,764,566            |
| North Sask. Laundry & Support Services Ltd.<br>(Housekeeping & Laundry) | 2,181,365            | 1,227,579            |
| Saskatchewan Association of Health Organizations<br>(Benefits & Other)  | 4,380,666            | 3,131,786            |
| Saskatchewan Healthcare Employees Pension Plan<br>(Benefits & Other)    | 6,890,409            | 5,238,226            |
| Saskatchewan Property Management Corporation<br>(Rent & Other)          | 1,084,027            | 892,510              |
| Saskatchewan Telecommunications<br>(Telephone & Other)                  | 790,538              | 712,521              |
| Battleford Family Health Centre (Other)                                 | 616,665              | 195,494              |
| Saskatchewan Energy (Utilities)                                         | 655,143              | 566,883              |
| Saskatchewan Power Corporation (Utilities)                              | 1,216,403            | 1,137,806            |
| Department of Finance (Various)                                         | 119,638              | 97,338               |
|                                                                         | <b>\$ 20,787,668</b> | <b>\$ 16,051,649</b> |
| <b>Related party accounts payable</b>                                   |                      |                      |
| Saskatchewan Association of Health Organizations                        | \$ 315,789           | \$ 187,444           |
| <b>Related party revenues</b>                                           |                      |                      |
| Saskatchewan Learning                                                   | \$ 2,105,575         | \$ 1,804,096         |
| SGI Canada Insurance Services Ltd.                                      | 195,061              | 125,573              |
| Workers' Compensation Board                                             | 590,505              | 4,262,467            |
|                                                                         | <b>\$ 2,891,141</b>  | <b>\$ 6,192,136</b>  |
| <b>Related party accounts receivable</b>                                |                      |                      |
| Workers' Compensation Board                                             | \$ 35,807            | \$ 39,281            |

In addition, the Authority pays Provincial Sales Tax to the Saskatchewan Department of Finance on all its taxable purchases. Taxes paid are recorded as part of the cost of these purchases.



**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**9. RELATED PARTIES (continued)**

*Health Care Organizations*

i) Community Based Organizations (CBOs) and Third Parties

The Authority has also entered into conditional grant agreements with CBOs and third parties to provide health services.

These organizations receive operating funding from the Authority on a monthly basis in accordance with budget amounts approved annually. During the year, the Authority provided the following amounts to CBOs and third parties.

|                                                                    | <u>2005</u>         | <u>2004</u>         |
|--------------------------------------------------------------------|---------------------|---------------------|
| Edwards Society Inc.                                               | \$ 291,236          | \$ 264,626          |
| Libbie Young Centre Inc.                                           | 293,032             | 261,636             |
| Walter A. "Slim" Thorpe Centre Inc.                                | 421,832             | 365,731             |
| Portage Vocational Society Inc.                                    | 71,054              | 54,746              |
| Canadian Mental Health Association<br>(Saskatchewan Division) Inc. | <u>127,179</u>      | <u>117,032</u>      |
|                                                                    | <u>\$ 1,204,333</u> | <u>\$ 1,063,771</u> |

ii) Affiliates

The Act makes the Authority responsible for the delivery of health services in its region including the health services provided by privately owned affiliates. The Act requires affiliates to conduct their affairs and activities in a manner that is consistent with, and that reflects, the health goals and objectives established by the Authority. The Authority exercises significant influence over affiliates by virtue of its material inter-entity transactions. The following presentation discloses the amount of funds granted to each affiliate:

|                            | <u>2005</u>         | <u>2004</u>         |
|----------------------------|---------------------|---------------------|
| Societe Joseph Breton Inc. | \$ <u>1,381,846</u> | \$ <u>1,256,350</u> |

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**9. RELATED PARTIES (continued)**

*Health Care Organizations (continued)*

**ii) Affiliates (continued)**

Saskatchewan Health requires additional reporting in the following financial summaries of the affiliate as at March 31, 2005 and 2004 and for the years then ended:

|                                  | 2005                | 2004                |
|----------------------------------|---------------------|---------------------|
| <b>Balance Sheet</b>             |                     |                     |
| Assets                           | \$ 305,372          | \$ 148,956          |
| Net Capital Assets               | 955,020             | 987,328             |
| Total Assets                     | <u>\$ 1,260,392</u> | <u>\$ 1,136,284</u> |
| <br>Total Liabilities            | <br>\$ 639,966      | <br>\$ 628,187      |
| Total Net Assets (Fund Balances) | <u>620,426</u>      | <u>508,097</u>      |
|                                  | <u>\$ 1,260,392</u> | <u>\$ 1,136,284</u> |
| <br><b>Results of Operations</b> |                     |                     |
| Authority Grant                  | \$ 1,381,846        | \$ 1,256,350        |
| Other Revenue                    | 586,841             | 552,447             |
| Total Revenue                    | <u>1,968,687</u>    | <u>1,808,797</u>    |
| <br>Salaries and Benefits        | <br>1,547,806       | <br>1,405,784       |
| Other Expenses *                 | 308,552             | 306,365             |
| Total Expenses                   | <u>1,856,358</u>    | <u>1,712,149</u>    |
| Excess of Revenues over Expenses | <u>\$ 112,329</u>   | <u>\$ 96,648</u>    |

\* Other Expenses includes amortization of \$47,818 (2004 - \$46,789).

**Cash Flows**

|                                     |                   |                   |
|-------------------------------------|-------------------|-------------------|
| Cash from Operations                | \$ 189,034        | \$ 147,957        |
| Cash used in Financing Activities   | (6,106)           | (8,312)           |
| Cash used in Investing Activities * | (15,509)          | (21,273)          |
| Increase in cash                    | <u>\$ 167,419</u> | <u>\$ 118,372</u> |

\* Investing Activities includes capital purchases of \$15,509 (2004 - \$23,428).





**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
NOTES TO THE FINANCIAL STATEMENTS  
year ended March 31, 2005**

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**9. RELATED PARTIES (continued)**

*Health Care Organizations (continued)*

**iii) Fund Raising Foundations**

Fundraising efforts are undertaken through non-profit business corporations known as Lloydminster Region Health Foundation Inc., Battlefords Union Hospital Foundation Inc., Meadow Lake Hospital Foundation Inc., and Twin Rivers Health Care Foundation Inc.

***Lloydminster Region Health Foundation Inc.***

The Authority has an economic interest in the Lloydminster Region Health Foundation Inc. (the "Lloydminster Foundation").

The Lloydminster Foundation's total expenses include contributions of \$251,669 (2004 - \$230,891) of which \$46,639 (2004 - \$34,429) is payable at March 31, 2005. As at March 31, 2005, the Lloydminster Foundation held funds of \$35,000 (2004 - \$83,003) which will flow to the Authority for capital and departmental purchases.

From time to time, the Lloydminster Foundation solicits funds which are used to purchase capital equipment for healthcare facilities within the Region.

The Authority provides office space and accommodations to the Lloydminster Foundation at no charge.

***Battlefords Union Hospital Foundation Inc.***

The Authority has an economic interest in the Battlefords Union Hospital Foundation (the "Battlefords Foundation").

The Battlefords Foundation's total expenses include contributions of \$243,640 (2004 - \$646,962) of which \$43,851 (2004 - \$469,102) is payable at March 31, 2005. As at March 31, 2005, the Battlefords Foundation held funds of \$nil (2004 - \$nil) which will flow to the Authority for capital and departmental purchases.

From time to time, the Battlefords Foundation solicits funds which are used to purchase capital equipment for healthcare facilities within the Region.

The Authority provides office space and accommodations to the Battlefords Foundation at no charge.

***Meadow Lake Hospital Foundation Inc.***

The Authority has an economic interest in the Meadow Lake Hospital Foundation Inc. (the "Meadow Lake Foundation").

The Meadow Lake Foundation's total expenses include contributions of \$4,774 (2004 - \$nil). As at March 31, 2005, the Foundation held funds of \$nil (2004 - \$16,937) which will flow to the Authority for capital and departmental purchases.

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
NOTES TO THE FINANCIAL STATEMENTS  
year ended March 31, 2005**

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**9. RELATED PARTIES (continued)**

*Health Care Organizations (continued)*

iii) Fund Raising Foundations (continued)

*Twin Rivers Health Care Foundation Inc.*

The Authority has an economic interest in the Twin Rivers Health Care Foundation Inc. (the "Twin Rivers Foundation").

The Twin Rivers Foundation's total expenses include contributions of \$44,074 (2004 - \$77,048) of which \$10,585 (2004 - \$77,048) is payable at March 31, 2005. As at March 31, 2005, the Twin Rivers Foundation held funds of \$nil (2004 - \$956) which will flow to the Authority for capital and departmental purchases.

From time to time, the Twin Rivers Foundation solicits funds which are used to purchase capital equipment for healthcare facilities within the Region.

**10. COMPARATIVE INFORMATION**

Certain of the 2003/2004 figures have been reclassified to conform to the current year's presentation.

**11. PENSION**

Employees of the RHA participate in one of the following pension plans:

1. Saskatchewan Healthcare Employees' Pension Plan (SHEPP) - This is jointly governed by a board of eight trustees. Four of the trustees are appointed by the Saskatchewan Association of Health Organizations (SAHO) (a related party) and four of the trustees are appointed by Saskatchewan's health care unions (CUPE, SUN, SEIU, SGEU, RWDSU, and HSAS). SHEPP is a multiemployer defined benefit plan, which came into effect December 31, 2002. (Prior to December 31, 2002, this plan was formerly the SAHO Retirement Plan and governed by the SAHO Board of Directors).

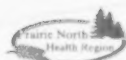
2. Public Service Superannuation Plan (a related party) - This is also a defined benefit plan and is the responsibility of the Province of Saskatchewan.

3. Public Employees' Pension Plan (a related party) - This is a defined contribution plan and is the responsibility of the Province of Saskatchewan.

The RHA's financial obligation is limited to making the required payments to these plans to match amounts contributed by employees for current services.

4. Alberta Local Authorities Pension Plan (LAPP) - This is a defined benefit plan that is the responsibility of the Province of Alberta. The Authority's financial obligation to the plans is limited to making required payments to match amounts contributed by employees for current services.

Under the *Public Sector Pension Plans Act of Alberta*, passed in May 1993, the Alberta Government employers and employees accepted responsibility to pay the unfunded obligation. The total LAPP





**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
NOTES TO THE FINANCIAL STATEMENTS  
year ended March 31, 2005**

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**11. PENSION (continued)**

unfunded pension liability at December 31, 2002, which is the latest available financial information, is \$444,980,000. The Region's share of the unfunded past service obligation is based on a percentage of pensionable payroll. The obligation will be partially reduced through increased contribution rates. If LAPP continues to experience low investment returns, a further rate adjustment will be necessary to increase the asset base.

Pension expense for the year amounted to \$4,726,366 (2004 - \$3,736,741) and is included in benefits in Schedule I.

Effective March 31, 2005, SHEPP contribution rates are as follows:

- 6.552% (2004 - 6.552%) of pensionable earnings up to the yearly maximum pensionable earnings (CPP) plus
- 8.232% (2004 - 8.232%) of pensionable earnings above the yearly maximum pensionable earnings (CPP).

**12. BUDGET**

The Authority approved the 2004-2005 budget plan on June 23, 2004.

**13. FINANCIAL INSTRUMENTS**

*Significant Terms and Conditions*

There are no significant terms and conditions related to financial instruments classified as current assets or current liabilities that may affect the amount, timing and certainty of future cash flows. Significant terms and conditions for the other financial instruments are disclosed separately in these financial statements.

*Credit Risk*

The Authority is exposed to credit risk from the potential non-payment of accounts receivable. The majority of the Authority's receivables are from Saskatchewan Health - General Revenue Fund, Saskatchewan Workers' Compensation Board, health insurance companies or other Provinces. Therefore, the credit risk is minimal.

*Fair Values*

The following methods and assumptions were used to estimate the fair value of each class of financial instruments:

- i) The carrying amounts of these financial instruments approximate fair value due to their immediate or short-term nature:
  - cash and short-term investments
  - accounts receivable
  - accounts payable
  - accrued salaries and vacation payable

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**13. FINANCIAL INSTRUMENTS (continued)**

ii) For investments, the fair value is considered to approximate quoted market values.

iii) The fair value of mortgages payable, before the repayment required within one year, is \$6,436,728 (2004 - \$6,362,252) and is determined using discounted cash flow analysis based on current incremental borrowing rates for similar borrowing arrangements.

*Unrecognized Financial Instruments*

To meet the needs of the North Sask. Laundry & Support Services Ltd., the Board participates in an off balance sheet financial instrument which these financial statements do not fully reflect. The Board subjected this financial instrument to its normal credit standards, financial controls, and risk management and monitoring procedures.

The Board has guaranteed the debts of the North Sask. Laundry & Support Services Ltd. to a maximum amount of \$67,275.

**14. INTERFUND TRANSFERS**

Each year the Authority transfers amounts between its funds for various purposes. These include funding capital asset purchases, and reassigning fund balances to support certain activities.

|                         | 2005             |                    |                      | 2004            |                   |                      |
|-------------------------|------------------|--------------------|----------------------|-----------------|-------------------|----------------------|
|                         | Operating Fund   | Capital Fund       | Community Trust Fund | Operating Fund  | Capital Fund      | Community Trust Fund |
| Capital asset purchases | \$ -             | \$ -               | \$ -                 | \$ -            | \$ -              | \$ -                 |
| CMHC reserves           | 34,060           | (34,060)           | -                    | 2,956           | (2,956)           | -                    |
| Mortgage payments       | -                | -                  | -                    | -               | -                 | -                    |
| Other                   | -                | -                  | -                    | -               | -                 | -                    |
|                         | <u>\$ 34,060</u> | <u>\$ (34,060)</u> | <u>\$ -</u>          | <u>\$ 2,956</u> | <u>\$ (2,956)</u> | <u>\$ -</u>          |

**15. HEALTH SERVICES PROVIDED TO ALBERTA RESIDENTS ON BEHALF OF EAST CENTRAL HEALTH**

*General*

The Authority is responsible for providing health services to Saskatchewan residents. East Central Health ("ECH"), formerly East Central Regional Health Authority 7, was created by Alberta Health in 1995. The Authority provides health services to Alberta residents under the Bi-Provincial Lloydminster Health Services Agreement with ECH. This agreement sets out the general principles and processes with respect to:

- i) the health services to be provided and the service areas and/or populations to be served by the Authority on behalf of ECH;





**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

**15. HEALTH SERVICES PROVIDED TO ALBERTA RESIDENTS ON BEHALF OF EAST CENTRAL HEALTH (continued)**

- ii) the operating, equipment and capital funding and any other related payments to be provided by ECH to the Authority;
- iii) the management and operation of the Dr. Cooke Extended Care Centre by the Authority;
- iv) the management and direction of Dr. Cooke Extended Care Centre employees by the Authority; and
- v) the reporting and accountability requirements in respect of the services provided by the Authority on behalf of the ECH.

Specific details on some of these matters have to be concluded as addenda to this agreement.

*Dr. Cooke Extended Care Centre*

The assets of the legal entity known as Dr. Cooke Extended Care Centre were transferred to ECH under the authority of Order In Council #106/95 dated March 31, 1995.

The Authority manages and operates this facility on behalf of the ECH.

These financial statements include operating assets, liabilities, revenue and expenses of the Dr. Cooke facility as follows:

|                                    | 2005                | 2004                |
|------------------------------------|---------------------|---------------------|
| <b>Balance Sheet</b>               |                     |                     |
| Cash and Short-Term Investments    | \$ 350              | \$ 350              |
| Accounts Receivable                | 35,174              | 33,250              |
| Inventory                          | 3,144               | 15,513              |
| Prepaid Expenses                   | 732                 | 732                 |
| Total Assets                       | <u>\$ 39,400</u>    | <u>\$ 49,845</u>    |
| Accounts Payable                   | \$ 35,950           | \$ 78,539           |
| Accrued Salaries                   | 70,561              | 170,027             |
| Accrued Vacation Pay               | 358,730             | 344,209             |
| Fund Deficit                       | (425,841)           | (542,930)           |
| Total Liabilities and Fund Balance | <u>\$ 39,400</u>    | <u>\$ 49,845</u>    |
| <b>Results of Operations</b>       |                     |                     |
| ECH Grant                          | \$ 4,662,264        | \$ 4,544,266        |
| Other Revenue                      | 1,749,115           | 1,573,915           |
| Total Revenue                      | <u>6,411,379</u>    | <u>6,118,181</u>    |
| Salaries & Benefits                | 5,356,545           | 5,355,151           |
| Other Expenses                     | 1,319,812           | 1,120,545           |
| Total Expenses *                   | <u>6,676,357</u>    | <u>6,475,696</u>    |
| Excess of Revenues over Expenses   | <u>\$ (264,978)</u> | <u>\$ (357,515)</u> |

\* Expenses includes Authority allocated costs of \$598,122 (2004 - \$587,485).

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**NOTES TO THE FINANCIAL STATEMENTS**  
year ended March 31, 2005

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**15. HEALTH SERVICES PROVIDED TO ALBERTA RESIDENTS ON BEHALF OF EAST CENTRAL HEALTH (continued)**

The Authority has the use of the capital assets of the Dr. Cooke facility for no charge. Neither the capital assets nor the related amortization expense are reflected in these financial statements because the assets continue to be the property of ECH.

**16. CONTINGENCIES**

*Lawsuits*

The Authority is currently involved as defendants in two legal claims. The Authority's insurance coverage would be adequate to cover the claims with the exception of one claim for aggravated and punitive or exemplary damages in the amount of \$7,400,000. The Authority does not consider that they, or their servants or agents acting on their behalf, were negligent in the care and treatment of the patients. The outcome of these legal claims cannot be determined at this time and accordingly, no liability has been recorded in these financial statements.

**17. VOLUNTEER SERVICES**

The operations of the Authority utilize services of many volunteers. Because of the difficulty in determining the fair market value of these donated services, the value of these donated services is not recognized in the financial statements.

**18. CONTINGENT LIABILITY**

*Joint Job Evaluation Reconsiderations*

The joint job evaluation/pay equity initiative for the service provider unions CUPE, SEIU, and SGEU allowed for an appeal process. As a result, employees and employers have filed reconsideration appeals that are currently under review. A financial obligation to pay reconsideration costs occurs once the Steering Committee reviews the recommendations from the Reconsideration Committee and reaches a consensus decision. At this time the Steering Committee has not yet reached any final decisions regarding the reconsiderations.

As the final results of the reconsideration process are currently unknown, the cost of the reconsiderations cannot be reasonably determined.

**19. CORRECTION OF ERROR**

During the year, the Authority discovered that \$140,871 was incorrectly included in the prior year's accounts payable. The error was corrected in the current year and resulted in a \$140,871 adjustment to the capital fund. The prior year comparative figures were not restated.





## Schedule I

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**SCHEDULE OF EXPENSES BY OBJECT**  
for the year ended March 31, 2005

|                                        | Budget<br>2004        | 2005                         | 2004                         |
|----------------------------------------|-----------------------|------------------------------|------------------------------|
|                                        | (Note 12)             |                              |                              |
| <b>Operating:</b>                      |                       |                              |                              |
| Benefits                               | \$ 14,777,650         | \$ 15,058,026                | \$ 13,508,252                |
| Board costs                            | 165,000               | 109,505                      | 139,187                      |
| Diagnostic imaging supplies            | 243,200               | 249,181                      | 233,814                      |
| Drugs                                  | 2,767,250             | 2,886,456                    | 2,595,376                    |
| Food                                   | 2,879,500             | 2,800,944                    | 2,806,821                    |
| Grants to ambulance services           | 1,615,073             | 1,742,455                    | 1,709,439                    |
| Grants to third parties                | 2,473,229             | 2,530,902                    | 2,364,964                    |
| Housekeeping and laundry supplies      | 747,480               | 844,041                      | 586,101                      |
| Information technology contracts       | 313,850               | 332,800                      | 302,006                      |
| Insurance                              | 321,200               | 339,037                      | 347,873                      |
| Interest                               | 9,700                 | 10,407                       | 12,259                       |
| Laboratory supplies                    | 1,163,700             | 1,198,540                    | 1,095,933                    |
| Medical and surgical supplies          | 2,563,250             | 2,693,507                    | 2,675,786                    |
| Medical remuneration and benefits      | 6,076,900             | 6,004,338                    | 5,677,310                    |
| Office supplies and other office costs | 1,214,625             | 1,321,756                    | 1,206,574                    |
| Other                                  | 2,064,050             | 2,170,398                    | 2,156,063                    |
| Other referred out services            | 4,161,020             | 4,139,391                    | 3,659,225                    |
| Professional fees                      | 695,668               | 705,358                      | 689,942                      |
| Prosthetics                            | 30,000                | 81,233                       | 20,194                       |
| Purchased services                     | 630,600               | 694,300                      | 486,876                      |
| Rent/lease costs                       | 785,900               | 838,332                      | 698,599                      |
| Repairs and maintenance                | 1,024,500             | 1,189,839                    | 1,013,061                    |
| Salaries                               | 85,049,508            | 83,999,245                   | 81,028,521                   |
| Service contracts                      | 510,420               | 731,109                      | 528,894                      |
| Travel                                 | 1,795,160             | 1,616,084                    | 1,666,086                    |
| Utilities                              | 2,955,600             | 3,000,266                    | 2,976,619                    |
|                                        | \$ <u>137,034,033</u> | \$ <u>137,287,450</u>        | \$ <u>130,185,775</u>        |
| <b>Restricted:</b>                     |                       |                              |                              |
| Amortization                           |                       | \$ 5,473,449                 | \$ 5,039,386                 |
| Other                                  |                       | <u>428,110</u>               | <u>422,718</u>               |
|                                        |                       | \$ <u>5,901,559</u>          | \$ <u>5,462,104</u>          |
|                                        |                       | \$ <u><u>143,189,009</u></u> | \$ <u><u>135,647,879</u></u> |

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**SCHEDULE OF CASH AND INVESTMENTS**  
for the year ended March 31, 2005

Schedule 2

|                                        | Amount        | Maturity  | Effective rate |
|----------------------------------------|---------------|-----------|----------------|
| <b>Unrestricted investments</b>        |               |           |                |
| Cash and Short-Term                    |               |           |                |
| Chequing and Savings                   |               |           |                |
| Lloydminster Royal Bank                | \$ 1,498,199  |           |                |
| North Battleford Credit Union          | 558,440       |           |                |
| Lloydminster Credit Union              | 6,372,533     |           |                |
| Lloydminster CIBC                      | 28,920        |           |                |
| Meadow Lake Credit Union               | 1,513,123     |           |                |
| Equities                               | 1,532         |           |                |
| CIBC Wood Gundy                        | 52,670        |           |                |
| Petty Cash                             | 15,298        |           |                |
| Total cash and short-term investments  | 10,040,715    |           |                |
| Long-Term                              |               |           |                |
| Credit Union Shares                    | 61,023        |           |                |
| Member Equity accounts                 | 34,300        |           |                |
| Other                                  |               |           |                |
| Commonwealth Credit Union              | 183,309       | n/a       | variable       |
| Saskatchewan Savings Bonds - Series IX | 57,000        | 15-Jul-05 | 5.75%          |
| Saskatchewan Savings Bonds - Series IX | 72,040        | 15-Jul-05 | 5.75%          |
| Canada Mortgage & Housing              | 160,083       | 1-Dec-05  | 6.25%          |
| Province of Alberta                    | 22,422        | 1-Dec-05  | 7.50%          |
| Province of Manitoba                   | 32,119        | 5-Jun-06  | 7.75%          |
| Canada Housing Trust                   | 47,489        | 15-Jun-06 | 5.53%          |
| Province of BC                         | 131,237       | 1-Dec-06  | 3.00%          |
| Province of Ontario                    | 191,710       | 12-Sep-07 | 6.13%          |
| Province of Saskatchewan               | 145,155       | 2-Jun-08  | 5.50%          |
| Bell Canada                            | 121,886       | 15-Jun-09 | 6.15%          |
| Bell Canada                            | 45,073        | 15-Jun-09 | 6.15%          |
| Hydro Quebec Global                    | 122,646       | 15-Jul-09 | 6.00%          |
| Province of BC                         | 120,993       | 1-Dec-09  | 6.25%          |
| Province of BC                         | 95,500        | 1-Dec-09  | 5.25%          |
| Government of Canada                   | 147,226       | 1-Jun-10  | 5.50%          |
| Total long-term investments            | 1,791,211     |           |                |
| Total Unrestricted Investments         | \$ 11,831,926 |           |                |
| <b>Restricted investments</b>          |               |           |                |
| <b>Capital Fund</b>                    |               |           |                |
| Cash and Short-term                    |               |           |                |
| Chequing and Savings                   |               |           |                |
| Meadow Lake CIBC                       | \$ 701,595    |           |                |
| Lloydminster Credit Union              | 4,085,454     |           |                |
| CIBC Wood Gundy                        | 21,548        |           |                |
| Total cash and short-term investments  | 4,808,597     |           |                |
| Long-Term                              |               |           |                |
| Credit Union Shares                    | 5             |           |                |
| Other                                  |               |           |                |
| Bell Canada                            | 45,073        | 9-May-05  | 6.50%          |
| Saskatchewan Savings Bond Series IX    | 43,000        | 15-Jul-05 | 5.75%          |
| Saskatchewan Savings Bond Series IX    | 27,960        | 15-Jul-05 | 5.75%          |
| Business Development Bank of Canada    | 12,000        | 15-Aug-05 | variable       |
| Province of BC                         | 78,520        | 23-Aug-05 | 5.07%          |
| Province of BC                         | 71,157        | 23-Aug-05 | 5.00%          |
| Province of BC                         | 130,334       | 1-Dec-06  | 3.00%          |
| Province of BC                         | 96,217        | 1-Dec-06  | 5.25%          |
| Province of BC                         | 66,700        | 1-Dec-06  | 3.00%          |
| Province of Manitoba                   | 139,223       | 16-May-07 | 6.63%          |
| Province of Ontario                    | 145,045       | 1-Dec-08  | 5.70%          |
| Total long-term investments            | 855,234       |           |                |
| Total Capital Fund Investments         | \$ 5,663,831  |           |                |



## Schedule 2

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**SCHEDULE OF CASH AND INVESTMENTS (continued)**  
 for the year ended March 31, 2005

|                                          | Amount              | Maturity  | Effective rate |
|------------------------------------------|---------------------|-----------|----------------|
| <b>Restricted investments</b>            |                     |           |                |
| <b>Community Trust Fund</b>              |                     |           |                |
| Cash and Short-term                      |                     |           |                |
| Chequing and Savings                     |                     |           |                |
| Meadow Lake                              | \$ 356,746          |           |                |
| Edam                                     | 49,035              |           |                |
| Goodsoil                                 | 69,780              |           |                |
| North Battleford Credit Union            | 150,696             |           |                |
| Lloydminster Credit Union                | 63,642              |           |                |
| Turtleford Credit Union                  | 32                  |           |                |
| Maidstone CIBC                           | 13,336              |           |                |
| Member Equity accounts                   | 4,113               |           |                |
| Term Deposits                            |                     |           |                |
| Lloydminster Credit Union                | 2,231               | 5-Apr-05  | 4.50%          |
| Maidstone CIBC                           | 11,011              | 7-Apr-05  | 3.00%          |
| Lloydminster Credit Union                | 9,734               | 5-May-05  | 1.55%          |
| Lloydminster Credit Union                | 107,774             | 10-May-05 | 2.60%          |
| Lloydminster Credit Union                | 34,432              | 16-May-05 | 1.10%          |
| Lloydminster Credit Union                | 12,265              | 24-May-05 | 1.10%          |
| Lloydminster Credit Union                | 24,129              | 10-Jun-05 | 1.30%          |
| Lloydminster Credit Union                | 4,932               | 29-Jun-05 | 1.55%          |
| Lloydminster Credit Union                | 132,000             | 15-Jul-05 | 1.50%          |
| Lloydminster Credit Union                | 315,962             | 27-Aug-05 | 3.00%          |
| Royal Bank GIC                           | 46,017              | 25-Oct-05 | 1.20%          |
| Maidstone CIBC                           | 385,150             | 8-Dec-05  | 1.00%          |
| Lloydminster Credit Union                | 90,000              | 25-Dec-05 | 1.35%          |
| Lloydminster Credit Union                | 35,000              | 31-Dec-05 | 0.75%          |
| Lloydminster Credit Union                | 65,000              | 4-May-07  | 0.75%          |
| Edam Credit Union                        | 50,000              | 22-Jan-08 | 4.25%          |
| Other                                    |                     |           |                |
| Canada Savings Bond                      | 5,500               | n/a       | variable       |
| CIBC T-Bill                              | 404,643             | n/a       | variable       |
| Saskatchewan Savings Bond Series IX      | 40,000              | 15-Jul-05 | 5.75%          |
| <b>Total Community Trust Investments</b> | <b>\$ 2,483,160</b> |           |                |

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**SCHEDULE OF EXTERNALLY RESTRICTED FUND BALANCES**  
for the year ended March 31, 2005

|                                      | COMMUNITY TRUST FUND EQUITY      |                                    |                 |                  |             | Balance,<br>end of<br>year |
|--------------------------------------|----------------------------------|------------------------------------|-----------------|------------------|-------------|----------------------------|
|                                      | Balance,<br>beginning<br>of year | Investment<br>and Other<br>Revenue | Donations       | Expenses         | Withdrawals |                            |
| Pine Island Lodge                    | \$ 684,182                       | \$ 23,059                          | \$ -            | \$ -             | (\$ 5,210)  | \$ 712,451                 |
| L. Gervais Memorial Health<br>Centre | 118,572                          | 2,583                              | -               | 10,005           | -           | 111,150                    |
| Northland Pioneer Lodge              | 349,397                          | 7,614                              | -               | -                | -           | 357,011                    |
| Lady Minto Health Centre             | 93,078                           | 2,394                              | 3,564           | 12,923           | -           | 86,113                     |
| Saskatchewan Hospital                | 140,871                          | 9,825                              | -               | -                | -           | 150,696                    |
| R.M. of Cut Knife                    | 136,812                          | 2,740                              | -               | -                | -           | 139,552                    |
| R.M. of Eldon                        | 395,770                          | 8,874                              | -               | -                | -           | 404,644                    |
| R.M. of Frenchman Butte              | 28,190                           | 389                                | -               | 2,220            | -           | 26,359                     |
| R.M. of Hillsdale                    | 94,416                           | 1,599                              | -               | -                | 5,210       | 90,805                     |
| R.M. of Mervin                       | 31                               | -                                  | -               | -                | -           | 31                         |
| R.M. of Paynton                      | 88,893                           | 3,157                              | -               | -                | -           | 92,050                     |
| R.M. of Wilton                       | 41,116                           | 1,321                              | -               | 1,955            | -           | 40,482                     |
| Town of Cut Knife                    | 45,337                           | -                                  | -               | -                | -           | 45,337                     |
| Town of Lashburn                     | 38,280                           | 573                                | -               | 3,370            | -           | 35,483                     |
| Town of Maidstone                    | 105,545                          | 2,228                              | -               | -                | -           | 107,773                    |
| Town of St. Walburg                  | 23,313                           | 267                                | -               | -                | -           | 23,580                     |
| Village of Marshall                  | 5,451                            | 5                                  | -               | -                | -           | 5,456                      |
| Village of Paradise Hill             | 7,366                            | 93                                 | -               | 2,330            | -           | 5,129                      |
| Village of Paynton                   | 13,427                           | -                                  | -               | -                | -           | 13,427                     |
| Village of Rockhaven                 | 12,995                           | 340                                | -               | -                | -           | 13,335                     |
| Village of Waseca                    | 10,893                           | 118                                | -               | -                | -           | 11,011                     |
|                                      | <u>\$ 2,433,935</u>              | <u>\$ 67,179</u>                   | <u>\$ 3,564</u> | <u>\$ 32,803</u> | <u>\$ -</u> | <u>\$ 2,471,875</u>        |





## Schedule 4

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY**  
**SCHEDULE OF INTERNALLY RESTRICTED FUND BALANCES**  
**for the year ended March 31, 2005**

|                                                       | Balance,<br>beginning<br>of year | Investment<br>income<br>allocated | Annual<br>Allocation | Correction<br>of error<br>(Note 19) | Other<br>Income     | Transfer to<br>unrestricted<br>operating<br>fund balance | Transfers RHA<br>Restricted &<br>Replacement<br>Reserves | Balance,<br>end of<br>year |
|-------------------------------------------------------|----------------------------------|-----------------------------------|----------------------|-------------------------------------|---------------------|----------------------------------------------------------|----------------------------------------------------------|----------------------------|
| <b>CMHC replacement reserves</b>                      |                                  |                                   |                      |                                     |                     |                                                          |                                                          |                            |
| Northland Pioneer Lodge                               | \$ 208,280                       | \$ 4,166                          | \$ 11,472            | \$ -                                | \$ -                | \$ (28,688)                                              | \$ -                                                     | <b>195,230</b>             |
| River Heights Lodge                                   | 124,113                          | 2,482                             | 15,735               | -                                   | -                   | (2,099)                                                  | (8,453)                                                  | <b>131,778</b>             |
| Cut Knife & District Special<br>Care Home Inc.        | 113,705                          | 2,274                             | 289                  | -                                   | -                   | (3,273)                                                  | (19,595)                                                 | <b>93,400</b>              |
| Turtle River Nursing Home                             | 69,550                           | -                                 | -                    | -                                   | -                   | -                                                        | -                                                        | <b>69,550</b>              |
| Lloydminster and District<br>Senior Citizens Lodge    | 139,387                          | 2,788                             | 13,000               | -                                   | -                   | -                                                        | (25,817)                                                 | <b>129,358</b>             |
| L.Gervais Memorial Health Centre                      | 4,500                            | 90                                | 4,500                | -                                   | -                   | -                                                        | (9,090)                                                  | <b>-</b>                   |
| Lakeland Lodge                                        | 64,244                           | 1,285                             | 6,500                | -                                   | -                   | -                                                        | (10,730)                                                 | <b>61,299</b>              |
|                                                       | <u>723,779</u>                   | <u>13,085</u>                     | <u>51,496</u>        | <u>-</u>                            | <u>-</u>            | <u>(34,060)</u>                                          | <u>(73,685)</u>                                          | <b>680,615</b>             |
| <b>Other internally restricted<br/>Capital Fund</b>   |                                  |                                   |                      |                                     |                     |                                                          |                                                          |                            |
| Capital Fund - RHA Restricted                         | 1,106,039                        | (13,085)                          | (51,496)             | 140,871                             | 6,753,027           | -                                                        | (3,107,006)                                              | <b>4,828,350</b>           |
| Donation Funds                                        | -                                | -                                 | -                    | -                                   | -                   | -                                                        | 9,458                                                    | <b>9,458</b>               |
| ER Renovation Reserve                                 | 309,000                          | -                                 | -                    | -                                   | -                   | -                                                        | -                                                        | <b>309,000</b>             |
| Reserve for Ambulance                                 | 128,365                          | -                                 | -                    | -                                   | -                   | -                                                        | -                                                        | <b>128,365</b>             |
|                                                       | <u>2,267,183</u>                 | <u>-</u>                          | <u>-</u>             | <u>140,871</u>                      | <u>6,753,027</u>    | <u>(34,060)</u>                                          | <u>(3,171,233)</u>                                       | <b>5,955,788</b>           |
| <b>Other internally restricted<br/>Operating Fund</b> |                                  |                                   |                      |                                     |                     |                                                          |                                                          |                            |
| Emergency Response                                    | 65,200                           | -                                 | -                    | -                                   | -                   | -                                                        | -                                                        | <b>65,200</b>              |
| Donation Funds                                        | -                                | -                                 | -                    | -                                   | -                   | 231,844                                                  | -                                                        | <b>231,844</b>             |
|                                                       | <u>65,200</u>                    | <u>-</u>                          | <u>-</u>             | <u>-</u>                            | <u>-</u>            | <u>231,844</u>                                           | <u>-</u>                                                 | <b>297,044</b>             |
|                                                       | <u>\$ 2,332,383</u>              | <u>\$ -</u>                       | <u>\$ -</u>          | <u>\$ 140,871</u>                   | <u>\$ 6,753,027</u> | <u>\$ 197,784</u>                                        | <u>\$ (3,171,233)</u>                                    | <b>\$ 6,252,832</b>        |

The Authority is required to maintain certain replacement reserves as a condition of receiving subsidy assistance from Saskatchewan Housing Corporation.

The other internally restricted capital fund balance represents cash available to the Authority and restricted by the Authority which has been earned within that fund or transferred to the fund from the Operating Fund or the Community Trust Fund.

The Authority established an internally restricted reserve for Emergency Response Services enhancements. This reserve can be used for either operating or capital expenditures and is at the discretion of the Authority.

In 2002, the Authority authorized the use of the replacement reserve to accommodate renovations required for the 400 wing of River Heights Lodge for the Adult Health Centre use. The transfer was included in Capital Donations and applied to actual expenditures for the renovations.

The above schedule shows the changes in these reserve balances during the year.

**PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
SCHEDULE OF  
BOARD REMUNERATION, BENEFITS, AND ALLOWANCES  
for the year ended March 31, 2005**

| Board Members       | 2005                         |                  |                   |                   | 2004                         |                                   |                   |  |
|---------------------|------------------------------|------------------|-------------------|-------------------|------------------------------|-----------------------------------|-------------------|--|
|                     | Retainer<br>and<br>Per Diems | Benefits (1)     | Other<br>Expenses | Total             | Retainer<br>and<br>Per Diems | Benefits<br>and Other<br>Expenses | Total             |  |
| <b>Chairperson</b>  |                              |                  |                   |                   |                              |                                   |                   |  |
| O'Grady, Bonnie     | \$ 24,435                    | \$ 12,452        | \$ 10,853         | \$ 47,740         | \$ 30,210                    | \$ 29,345                         | \$ 59,555         |  |
| <b>Board Member</b> |                              |                  |                   |                   |                              |                                   |                   |  |
| Christensen, Ben    | 2,938                        | 905              | 846               | 4,689             | 3,750                        | 1,949                             | 5,699             |  |
| Conacher, Muriel    | 3,150                        | 1,150            | 1,045             | 5,345             | 3,412                        | 2,103                             | 5,515             |  |
| Gregor, Brenda      | 1,000                        | 395              | 505               | 1,900             | 3,275                        | 2,876                             | 6,151             |  |
| Hansen, Zane        | 1,900                        | 1,068            | 1,150             | 4,118             | 3,200                        | 3,748                             | 6,948             |  |
| Helm, Vicki         | 5,500                        | 2,224            | 1,161             | 8,885             | 6,837                        | 3,757                             | 10,594            |  |
| Hill, Joan          | 3,825                        | 2,801            | 2,873             | 9,499             | 5,412                        | 5,880                             | 11,292            |  |
| McCaffery, Ruth     | 2,688                        | 388              | 758               | 3,834             | 4,725                        | 2,273                             | 6,998             |  |
| Whittaker, Don      | 3,338                        | 1,855            | 2,324             | 7,517             | 3,900                        | 5,152                             | 9,052             |  |
| Wouters, Glen       | 2,375                        | 839              | 1,125             | 4,339             | 3,000                        | 1,875                             | 4,875             |  |
| Yaychuk, Elaine     | 1,450                        | 712              | 892               | 3,054             | 2,000                        | 1,558                             | 3,558             |  |
| Young, Donald       | 3,925                        | 1,144            | 1,493             | 6,562             | 5,137                        | 3,132                             | 8,269             |  |
|                     | <u>\$ 56,524</u>             | <u>\$ 25,933</u> | <u>\$ 25,025</u>  | <u>\$ 107,482</u> | <u>\$ 74,858</u>             | <u>\$ 63,648</u>                  | <u>\$ 138,506</u> |  |

(1) Benefits include employer CPP and all travel time

\* Payee Disclosure List - A listing of PNRHA's Public Accounts Report is available on request from the Prairie North Regional Health Authority Office in North Battleford.



## Abbreviations List

|          |                                                      |      |                                                          |
|----------|------------------------------------------------------|------|----------------------------------------------------------|
| AB       | Alberta                                              | SEP  | Single Entry Point                                       |
| ACLS     | Advanced Cardiac Life Support                        | SHIN | Saskatchewan Health Information Network                  |
| ADT      | Admission, Discharge Transfer                        | SHNB | Saskatchewan Hospital North Battleford                   |
| ALS      | Advanced Life Support                                | SPMC | Saskatchewan Property Management Corporation             |
| BDCC     | Battlefords District Care Centre                     | SSCN | Saskatchewan Surgical Care Network                       |
| BMI      | Body Mass Index                                      | SUN  | Saskatchewan Union of Nurses                             |
| BTC      | Battlefords Tribal Council                           | TCA  | Tobacco Control Act TLR Transfer, Lift and Repositioning |
| BUH      | Battlefords Union Hospital                           | UNA  | United Nurses of Alberta                                 |
| BUHF     | Battlefords Union Hospital Foundation                | WCB  | Workers Compensation Board                               |
| CAN(s)   | Community Advisory Network(s)                        | WNV  | West Nile Virus                                          |
| CBIP     | Canadian Building Incentives Program                 |      |                                                          |
| CBO      | Community-Based Organization                         |      |                                                          |
| CCHSA    | Canadian Council on Health Services Accreditation    |      |                                                          |
| CEO      | Chief Executive Officer                              |      |                                                          |
| CQI      | Continual Quality Improvement                        |      |                                                          |
| CT       | Computerized Tomography                              |      |                                                          |
| CUPE     | Canadian Union of Public Employees                   |      |                                                          |
| ECH      | East Central Health (Region, Alberta)                |      |                                                          |
| EMS      | Emergency Medical Services                           |      |                                                          |
| EMT      | Emergency Medical Technician                         |      |                                                          |
| ENT      | Ear, Nose and Throat                                 |      |                                                          |
| ESP      | Employee Scheduling Program                          |      |                                                          |
| FASD     | Fetal Alcohol Spectrum Disorder                      |      |                                                          |
| FTE(s)   | Full-Time Equivalent(s)                              |      |                                                          |
| HCO(s)   | Health Care Organizations(s)                         |      |                                                          |
| HISC     | Health Information Services Centre                   |      |                                                          |
| HIV      | Human Immunodeficiency Virus                         |      |                                                          |
| HQC      | Health Quality Council                               |      |                                                          |
| HSAS     | Health Sciences Association of Saskatchewan          |      |                                                          |
| IT       | Information Technology                               |      |                                                          |
| LPN      | Licensed Practical Nurse                             |      |                                                          |
| LRHF     | Lloydminster Region Health Foundation                |      |                                                          |
| MAC      | Medical Advisory Committee                           |      |                                                          |
| MDS/RUGS | Minimal Data Set/Resource Utilization Group          |      |                                                          |
| MHO      | Medical Health Officer                               |      |                                                          |
| MRI      | Magnetic Resonance Imaging                           |      |                                                          |
| MRSA     | Methicillin Resistant Staphylococcus Aureus          |      |                                                          |
| NP       | Nurse Practitioner                                   |      |                                                          |
| NSL      | North Sask Laundry (& Support Services Ltd.)         |      |                                                          |
| OH&S     | Occupational Health and Safety OOS Out-of-Scope      |      |                                                          |
| PART     | Professional Assault Response Training               |      |                                                          |
| PHC      | Primary Health Care PNHR Prairie North Health Region |      |                                                          |
| PNRHA    | Prairie North Regional Health Authority              |      |                                                          |
| QCC      | Quality of Care Coordinator                          |      |                                                          |
| RHA      | Regional Health Authority                            |      |                                                          |
| RIC      | Regional Intersectoral Committee                     |      |                                                          |
| RM       | Rural Municipality                                   |      |                                                          |
| RN       | Registered Nurse                                     |      |                                                          |
| SAHO     | Saskatchewan Association of Health Organizations     |      |                                                          |





## Appendix One

### PRAIRIE NORTH REGIONAL HEALTH AUTHORITY PAYEE DISCLOSURE LIST For the Year Ended March 31, 2005

Personal Services  
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Listed are individuals who received payments for salaries, wages, honorariums, etc. which total \$50,000 or more

|                       |         |                     |        |                      |         |
|-----------------------|---------|---------------------|--------|----------------------|---------|
| Akre, Kim             | 61,854  | Bonnett, Cindy      | 59,561 | Cook, Robert         | 83,438  |
| Albert, Lori          | 54,683  | Booth, Beverly      | 80,332 | Cook, Danelle        | 55,747  |
| Allen, Clinton        | 54,602  | Borgeson, Connie    | 58,939 | Cooke, Leanne        | 66,082  |
| Anderson, Rochelle    | 53,450  | Borowsky, Gail      | 78,300 | Cooke, Heather       | 51,540  |
| Antymniuk, Cherylyn   | 78,878  | Boskill, Sharon     | 74,680 | Corbeil, Alan        | 51,502  |
| Arneson, Lillian      | 56,007  | Boulton, Noreen     | 62,181 | Corpe, Cathy         | 57,467  |
| Arthur, Teresa        | 55,334  | Bouvier, Linda      | 63,498 | Cortus, Debby        | 62,841  |
| Auriat, Odette        | 78,882  | Bouvier, Erin       | 51,472 | Crone, Eileen        | 60,980  |
| Bailey, Todd          | 79,737  | Boyachek, Shelly    | 53,422 | Crossman, Doris      | 58,428  |
| Bailey, Kathryn       | 70,168  | Brander, Bonita     | 50,344 | Crowder, Nichole     | 54,310  |
| Ballan, Maureen       | 65,610  | Brick, Dean         | 66,179 | Curtis, Michelle     | 50,111  |
| Bandola, James        | 51,306  | Brinsky, Heather    | 64,334 | Dahl, Glenda         | 52,980  |
| Barnett, Isabelle     | 57,410  | Brost, Ruth         | 68,401 | Day, Kelly           | 55,084  |
| Barr, Idella          | 57,056  | Brow, Robert        | 57,947 | Dearborn, Anna       | 57,816  |
| Barry, Jone           | 90,361  | Brown, Robert       | 87,411 | Decelle, Kathy       | 53,384  |
| Bartkewich, Catherine | 57,110  | Brown, Betsy        | 59,150 | Demontarnal, Marie   | 59,746  |
| Bauer, Tina           | 60,44   | Brucks, Susan       | 51,822 | Deneschuk, Judith    | 59,487  |
| Bauming, Holly        | 62,340  | Buchynski, Kenneth  | 74,377 | Denis, Irene         | 101,328 |
| Baynham, Jacquelin    | 69,727  | Buettner, Deborah   | 67,208 | Denton, Andrea       | 62,118  |
| Baynham, Carrie       | 53,74   | Bullock, Karen      | 59,128 | Denton, Errol        | 51,015  |
| Beach, Kathy          | 52,326  | Bunnell, Diane      | 76,214 | Derkach, Linda       | 88,365  |
| Beaubien, Janet       | 50,811  | Burroughs, Penny    | 65,647 | Deutscher, Carol     | 57,153  |
| Beckman, Barbara      | 56,296  | Burry, Jean         | 68,814 | Dimmick, Tammy       | 66,17   |
| Bedford, Shirley      | 62,591  | Buschman, Lori      | 58,145 | Dodsworth, Dawn      | 66,082  |
| Beisel, Shanna        | 54,607  | Buziak, Wanda       | 58,324 | Doom, Debra          | 58,497  |
| Bendall, Lucy         | 62,882  | Callioux, Lynda     | 84,438 | Douville, Lorraine   | 72,726  |
| Bennett, Christine    | 67,005  | Campagnola, Gary    | 79,480 | Dudar, Sylvia        | 69,845  |
| Bentley, Regina       | 60,761  | Cann, Terry         | 69,744 | Duddridge, Shawn     | 64,343  |
| Bergmann, Catherine   | 65,526  | Carey, D            | 83,758 | Dumouchel, Kathryn   | 58,525  |
| Bertsch, Shirley      | 57,045  | Carswell, Rita      | 59,158 | Dupuis, Darlene      | 63,898  |
| Bielecki, Joanne      | 67,003  | Cavanagh, Dianne    | 60,846 | Dyck, Carol          | 71,885  |
| Bilanski, Lisa        | 54,215  | Chambers, Margaret  | 64,070 | Eberle, Cindy        | 77,920  |
| Birkett, Sandra       | 68,809  | Charabin, Brenda    | 53,466 | Edgar Cozine, Shelly | 80,178  |
| Birkett, Bryan        | 61,718  | Charette, Gilles    | 64,902 | Elliott Rumpf, Karen | 55,812  |
| Bishop, Marla         | 59,116  | Chartier, Constance | 83,068 | Engelke, Albrecht    | 99,939  |
| Blais, Patrick        | 72,645  | Chaykowski, Brenda  | 62,435 | Engelke, Carmel      | 80,641  |
| Blais, Louise         | 58,876  | Chomicki, Doreen    | 57,849 | English, Roderick    | 71,418  |
| Blais, Elaine         | 58,434  | Chubb, Patricia     | 74,266 | English, Darlene     | 61,823  |
| Bloch Hansen, Kathryn | 62,868  | Clarke, Darlene     | 55,801 | Epp, Priscilla       | 54,033  |
| Bobesko, Trisha       | 58,546  | Cleary, Celeste     | 52,418 | Etcheverry, Patricia | 80,011  |
| Bodnar, Cynthia       | 118,463 | Conacher, Laurie    | 63,507 | Etcheverry, Lionel   | 62,292  |
| Bogdan, Kevin         | 59,490  | Conacher, Ashley    | 53,458 | Etcheverry, Valerie  | 53,696  |
| Bojarski, Shirley     | 52,004  | Conkin, Marie       | 54,145 | Etue, Christine      | 51,029  |

PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
PAYEE DISCLOSURE LIST  
For the Year Ended March 31, 2005

Personal Services  
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|                           |         |                     |         |                     |         |
|---------------------------|---------|---------------------|---------|---------------------|---------|
| Fan, David                | 132,802 | Gubbe, Debra        | 63,327  | Illingworth, Connie | 63,473  |
| Farrell, Barbara          | 57,471  | Gubbe, Greg         | 62,563  | Imhoff, Phyllis     | 54,559  |
| Feist, Hazel              | 53,203  | Gullion, Nicole     | 64,759  | Ip Fung Chun, Roger | 68,841  |
| Felix, Richard            | 53,062  | Gunderson, Alison   | 59,538  | Iwanchuk, Debbie    | 63,473  |
| Ferguson, Wendy           | 71,428  | Gust, Janet         | 54,244  | Jabusch, Melodie    | 54,337  |
| Ferguson, Sandra          | 62,565  | Gusztak, Lewko      | 237,836 | Jamieson, Claudette | 92,332  |
| Ferland, Armande          | 62,436  | Hadland, Brenda     | 57,015  | Jamieson, Jennifer  | 62,998  |
| Floarea, Cristina         | 56,816  | Hagerty, Tammy      | 54,781  | Joatar, Faris       | 60,772  |
| Forester, Barbara         | 63,716  | Hall, Leeanne       | 61,265  | Johner, Maxine      | 83,319  |
| Franz, Robert             | 65,391  | Hanna, Pamela       | 60,034  | Jones, Judy         | 52,700  |
| Frey, Geoff               | 55,680  | Hannis, Lynda       | 60,736  | Jonsson, Brian      | 71,885  |
| Friedrich, Andy           | 60,228  | Harasymuk, Brian    | 81,246  | Jordan, Debra       | 59,316  |
| Frolek, Patricia          | 66,882  | Harbus, Debbie      | 64,255  | Kaltenborn, Vicki   | 65,154  |
| Fung, Teresa              | 70,726  | Hardy, Emily        | 68,374  | Kaplar, Gwendolyn   | 70,874  |
| Gabruch, Colleen          | 62,395  | Harms, Shannon      | 61,088  | Karra, Michael      | 68,745  |
| Gallano, Florinda         | 52,906  | Harrison, Shelly    | 60,506  | Karra, Paula        | 65,073  |
| Garand, Don               | 50,533  | Harrison, Garth     | 51,779  | Keller, Jerry       | 101,278 |
| Gardiner, Angela          | 57,813  | Harvey, Patricia    | 57,514  | Kerechuk, Charlotte | 52,019  |
| Gerbig, Karen             | 79,269  | Haughian, Terrie    | 67,979  | Killoran, James     | 59,754  |
| Gerbrandt, Gloria         | 62,785  | Hawley, Marlene     | 56,714  | Kingwell, Darlene   | 51,074  |
| Gervais, Donnell          | 66,481  | Heidel, Kellie      | 69,559  | Kirtzinger, Brenda  | 80,494  |
| Gervais, Lynne            | 58,157  | Heidel, Michelle    | 64,823  | Knutson, Theresa    | 55,798  |
| Gibb, Marie Pat           | 53,616  | Hepp, Raquel        | 68,492  | Koch, Lori          | 70,616  |
| Gill, Chris               | 51,430  | Hertes, Susan       | 68,904  | Koch, Gail          | 56,237  |
| Gillen, Toby              | 75,192  | Hetu, Deborah       | 61,814  | Kopp, Catherine     | 65,890  |
| Girodat, Jacquelin        | 66,903  | Hillier, Craig      | 75,635  | Koroll, Georgette   | 61,429  |
| Glassford, Carrie         | 69,164  | Hilsendager, Brent  | 53,194  | Koroluk, Richard    | 62,547  |
| Glowa, Lorne              | 63,033  | Hoganson, Mardelle  | 54,156  | Kotun, Laurie       | 50,630  |
| Goota, Monica             | 72,951  | Hoglander, Lorna    | 54,510  | Kozlowski, Koreen   | 69,480  |
| Gossen, Karen             | 66,555  | Holba, Barb         | 71,565  | Kramer, Barbara     | 50,535  |
| Graham, Susan             | 60,282  | Horn, Janice        | 62,455  | Kryvoblocki, Shelly | 51,974  |
| Graham, Monica            | 59,550  | Horpestad, Beverlie | 53,394  | Laclare, Larry      | 56,852  |
| Grant, Sandra             | 58,280  | Horsman, Shelly     | 63,767  | Laclare, Elaine     | 51,965  |
| Grasby, Michele           | 56,172  | Houk, Beverley      | 62,565  | Lafreniere, Pamela  | 66,770  |
| Graupe, Lori              | 66,265  | Hryn, Donna         | 53,222  | Lahey Wiggs, Carol  | 54,250  |
| Greenwood, Beverly        | 63,253  | Hubbard, Barry      | 240,992 | Lamb, Linda         | 61,212  |
| Gregg, Joanne             | 51,418  | Humenny, Therese    | 76,571  | Lamoureux, Peggy    | 76,284  |
| Greschner, Nadyne         | 65,852  | Hunt, Cecile        | 101,328 | Landreth, Janet     | 62,837  |
| Grychowski White, Loraine | 82,909  | Hutchinson, Corinne | 50,230  | Landrie, Cynthia    | 50,491  |
| Gubbe, Louis              | 83,589  | Huxley, Denise      | 69,230  | Laplante, Christina | 50,193  |
| Gubbe, Spencer            | 64,981  | Igini Close, Marie  | 53,186  | Larson, Melinda     | 56,611  |



PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
PAYEE DISCLOSURE LIST  
For the Year Ended March 31, 2005

Personal Services  
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|                     |         |                    |         |                         |        |
|---------------------|---------|--------------------|---------|-------------------------|--------|
| Lauritzen, Dianne   | 52,572  | Moir, Barbara      | 64,754  | Piper, Diane            | 62,915 |
| Lavoie, Gail        | 56,881  | Moore, Dennis      | 60,079  | Pitman Fisher, Patricia | 64,296 |
| Lavoie, Judy        | 53,082  | Moore, Linda       | 56,942  | Politeski, Linda        | 63,473 |
| Leboeuf, Bernadett  | 57,917  | Morin, Roxanne     | 70,962  | Pollock, Stephen        | 56,905 |
| Leibel, Lillian     | 64,350  | Moylan, Jennifer   | 55,037  | Prescesky, Jan          | 58,008 |
| Leier, Betty Lou    | 64,034  | Munroe, Frank      | 54,410  | Preston, Colleen        | 71,906 |
| Leitner, Jean       | 63,646  | Murphy, Irene      | 68,054  | Pruden Mcivor, Suzanne  | 71,866 |
| Leniuk, Janine      | 53,415  | Nachtegaele, Glenn | 52,314  | Prystupa, Edna          | 63,521 |
| Lewis, Linda        | 60,228  | Naigle, Odile      | 73,299  | Pyle, Nathan            | 56,031 |
| Lindquist, Randy    | 75,114  | Nash, Faith        | 52,982  | Quarshie, Linda         | 55,520 |
| Lindquist, Murray   | 73,819  | Navarro, Lori      | 61,165  | Raiche, Chasity         | 57,987 |
| Lindquist, Marilyn  | 61,654  | Nelson, Donna      | 60,374  | Raiche Bogdan, Karen    | 67,398 |
| Loch, Sharlene      | 88,670  | Nesdoly, Allison   | 57,349  | Rathke - Kubik, Candace | 51,203 |
| Lockhart, Joyce     | 65,102  | Nielsen, Tracie    | 84,438  | Raw, Julie              | 55,599 |
| Loney, Shirley      | 76,366  | Noyce, Darlene     | 59,322  | Rea, Gina               | 52,948 |
| Lummerding, Michael | 68,637  | Nystrom, Dawn      | 69,071  | Rebeyka, Helen          | 56,475 |
| Macciarmid, Donna   | 59,533  | Oberg, Deborah     | 72,385  | Redhead, Tammy          | 52,311 |
| Macdonald, Joan     | 66,087  | Oborowsky, Earl    | 61,615  | Reimer, Bruce           | 70,126 |
| Mackinnon, David    | 85,840  | Olenick, Glenna    | 62,076  | Reinhart, Cathy         | 63,099 |
| Mackrell, Carol     | 66,567  | O'iver, Lynda      | 62,579  | Reiter, Ruth            | 53,536 |
| Macnab, Ralph       | 69,848  | Oliver, Lisa       | 58,353  | Rewerts, Marsha         | 58,738 |
| Macnab, Brenda      | 50,024  | Olien, Joan        | 52,554  | Rhinehart, Marcia       | 58,370 |
| Mamer, Susan A      | 62,825  | Olson, Donna       | 68,423  | Ribey, Coleen           | 67,610 |
| Manegre, Carole     | 62,029  | Ormelchenko, Kim   | 64,820  | Risling, Diana          | 60,727 |
| Manegre, Sherri     | 54,468  | Oquinn, Jeanne     | 74,600  | Roberts, Mathew         | 60,257 |
| Mann, Sabrina       | 69,525  | Orriss, Cliff      | 69,657  | Roberts, Melanie        | 54,875 |
| Marchewka, Bradley  | 73,312  | Oster, Adrienne    | 57,027  | Robinson, Shelley       | 62,821 |
| Mason, Betty        | 62,875  | Ouellette, Keith   | 78,295  | Robinson, Alice         | 56,867 |
| Matechuk, Joan      | 61,319  | Ouellette, Sandra  | 61,028  | Rogers, Corrinne        | 65,048 |
| Mccall, Gerard      | 78,710  | Palidwor, Marion   | 61,914  | Rogers, Ann             | 51,058 |
| Mcdonald, Carla     | 54,522  | Palmer, Janet      | 62,184  | Roszein, Diane          | 80,723 |
| Mcintyre, Darcy     | 62,275  | Panamaroff, Ruby   | 59,237  | Roth, Louise            | 72,479 |
| Mcmillan, Murray    | 61,766  | Parker, Scott      | 58,705  | Rothenburger, Evelyn    | 62,880 |
| Mcneil, Dana        | 73,134  | Parkinson, Glenda  | 54,661  | Roussel, Debbie         | 57,055 |
| Mcouat, Ina         | 50,480  | Pashniak, Sandra   | 50,759  | Rowland, Mary           | 50,142 |
| Mcrae, Kenneth      | 70,268  | Paylor, Lindsay    | 54,705  | Roy, Melodie            | 67,481 |
| Mcwatters, Patricia | 70,211  | Pellerin, Sonja    | 64,899  | Rutherford, Joyce       | 61,856 |
| Mec, Brad           | 53,577  | Pellerin, Marla    | 58,977  | Saccucci, Renee         | 52,758 |
| Meena, Sharon       | 52,765  | Penpena, Chona     | 57,962  | Sack, Linda             | 70,664 |
| Mehboob, Mohammad   | 143,513 | Pentz, Daniel      | 271,654 | Sankey, Sharon          | 74,467 |
| Meikle, Mary Lynn   | 55,597  | Perkins, Diane     | 52,781  | Savoie, Dallas          | 79,439 |
| Melchior, Jacquelin | 53,278  | Peterson, Deborah  | 62,695  | Sayers, Chad            | 83,308 |
| Melenchuk, Dalton   | 58,025  | Peterson, Janet    | 59,487  | Sayers, Tracey          | 61,416 |
| Michaud, Jeanne     | 50,103  | Petruk, Paula      | 67,808  | Schlapkohl, Wayne       | 73,810 |
| Misener, Patricia   | 50,580  | Phommavong, Dur    | 57,651  | Schmitz, Anita          | 63,473 |
| Mitchell, Cheryl    | 69,152  | Platt, Roger       | 59,134  | Schweder, Laurie        | 70,023 |
| Mitchell, Janet     | 59,157  | Piche, Eileen      | 54,466  | Servold, Brenda         | 61,503 |

PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
PAYEE DISCLOSURE LIST  
For the Year Ended March 31, 2005

Personal Services  
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|                        |         |                     |         |                  |        |
|------------------------|---------|---------------------|---------|------------------|--------|
| Shaw, Adena            | 60,801  | Vany, Jamie         | 60,567  | Yuhasz, Juanita  | 62,385 |
| Shynkaruk, Linda       | 80,514  | Vany, Angele        | 51,492  | Zacharias, Wayne | 50,351 |
| Sieben, Tracy          | 59,250  | Varghese, Gigi      | 50,871  | Zeleny, Tracy    | 54,688 |
| Simon, Curtis          | 73,898  | Veikle, Joan        | 51,555  | Zimmer, Joan     | 84,268 |
| Simon, Doreen          | 62,313  | Verma, Narendra     | 107,823 | Zinger, Ronda    | 53,628 |
| Simons, Karen          | 56,867  | Vick, Bonnie        | 86,508  | Zou, Hongyu      | 55,193 |
| Sithole, Maureen       | 55,324  | Wall, Elaine        | 54,098  |                  |        |
| Smith, Faye            | 53,951  | Wallace, Lucy       | 64,466  |                  |        |
| Sonnega, Lois          | 57,886  | Walls, James        | 69,674  |                  |        |
| Southgate, Pamela      | 59,814  | Wappel, Wendy       | 64,726  |                  |        |
| Spence, Caroll         | 79,623  | Warrington, Natalie | 51,151  |                  |        |
| Spencer, Bonnie        | 65,363  | Wasson, Lorraine    | 79,784  |                  |        |
| Squair, Laura          | 70,571  | Wasyliv, Shelley    | 61,786  |                  |        |
| Startup, Ken           | 58,214  | Waterhouse, Jodie   | 56,043  |                  |        |
| Stein, Eleanor         | 50,616  | Watson, Donna       | 69,717  |                  |        |
| Steinborn, Laura       | 64,356  | Watson, Katharina   | 61,681  |                  |        |
| Stener, Marian         | 64,716  | Watson, Carolyn     | 50,480  |                  |        |
| Stevens, Faye          | 69,841  | Watt, Kelly         | 66,801  |                  |        |
| Stirton, Kimberlee     | 57,802  | Watt, William       | 62,553  |                  |        |
| Stoebich, Irene        | 65,618  | Watt, Anne          | 58,005  |                  |        |
| Stoebich, Haley        | 50,278  | Weber, Bonnie       | 52,011  |                  |        |
| Streberg, Gail         | 50,271  | Weikle, Mireille    | 63,621  |                  |        |
| Strueby, Gail          | 59,934  | Weir, Shirley       | 66,492  |                  |        |
| Suberlak, Rhonda       | 75,530  | Weston, Marlene     | 77,974  |                  |        |
| Suter, Marj            | 53,530  | White, Terry        | 56,012  |                  |        |
| Sutherland, Brenda     | 66,387  | Whittaker, Brian    | 67,600  |                  |        |
| Sutherland, Debra      | 50,746  | Whittles, Shirley   | 52,385  |                  |        |
| Sutton, Richard        | 62,346  | Whyte, Sneila       | 59,568  |                  |        |
| Sword, Sherry          | 66,962  | Wick, Judith        | 56,930  |                  |        |
| Sylvestre, Neal        | 77,371  | Wiklund, Lori       | 52,788  |                  |        |
| Tarasoff, Lorna        | 75,386  | Wilford, Loucinda   | 66,546  |                  |        |
| Tatchell, Maureen      | 61,150  | Wilkes, Michelle    | 51,369  |                  |        |
| Taylor, Sheila         | 61,350  | Wilkie, Fred        | 51,203  |                  |        |
| Tebay, Roberta         | 89,117  | Wilson, Cheri       | 53,986  |                  |        |
| Ternes, Ronald         | 86,729  | Winterhalt, Blaine  | 56,526  |                  |        |
| Thomas, Kiriana        | 53,782  | Wirachowsky, Jean   | 51,032  |                  |        |
| Thomas, Patricia       | 50,269  | Wladychka, Robert   | 82,850  |                  |        |
| Tkatchuk, Phyllis      | 54,601  | Wobeser, Edith      | 77,778  |                  |        |
| Tobin, Pamela          | 62,098  | Wolfe, Anita        | 56,250  |                  |        |
| Toews, Celeste         | 51,910  | Woloski, Roy        | 58,062  |                  |        |
| Tollefson, Judy        | 77,411  | Wood, Darlene       | 50,341  |                  |        |
| Toye, Colleen          | 59,934  | Woodrow, Nicole     | 57,769  |                  |        |
| Tran, Sam              | 60,935  | Wright, Melissa     | 56,940  |                  |        |
| Tuiloma, Adi           | 50,206  | Wyatt, Shirley      | 59,115  |                  |        |
| Uzelman, Glennys       | 101,278 | Wychopen, Janice    | 63,076  |                  |        |
| Van Der Merwe, Lynette | 65,255  | Yates, Donald       | 59,415  |                  |        |
| Vany, Yvonne           | 62,946  | Yuen, Wai           | 87,412  |                  |        |



PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
PAYEE DISCLOSURE LIST  
For the Year Ended March 31, 2005

Supplier Payments

Listed are payees who received \$50,000 or more for the provision of goods and services, including office supplies, communications, contracts and equipment.

|                                    |         |                                                       |            |
|------------------------------------|---------|-------------------------------------------------------|------------|
| Abbott Laboratories                | 682,498 | MedTec Marketing                                      | 217,234    |
| Alcon Canada                       | 179,657 | Minister of Finance                                   | 110,374    |
| Aodbt Architecture Interior        | 59,098  | Nicole Enterprises Inc                                | 71,840     |
| Arjo Canada Inc                    | 143,231 | Nor West Distributors Inc                             | 66,310     |
| Battleford School Division 118     | 151,080 | North Sk Laundry & Support                            | 2,179,371  |
| Bayer Incorporated                 | 117,771 | North West Roman Catholic Separate School 16          | 59,390     |
| BCOM Computer Centre Corporation   | 304,973 | Nova Biomedical Canada Ltd                            | 53,174     |
| Beckman Coulter Canada Inc         | 214,732 | Novartis Pharmaceuticals Canada                       | 273,782    |
| Bexson Construction                | 340,700 | Ormed Information Systems Ltd                         | 232,303    |
| Biomerieux Canada Incorporated     | 107,426 | Ortho Clinical Diagnostic                             | 194,399    |
| Brathwaites Oliver Medical Inc     | 180,832 | Philips Medical Systems                               | 200,331    |
| Bunzl Canada                       | 145,246 | Portage Vocational Society Inc                        | 71,054     |
| Canadian Corps of Commissionaires  | 147,830 | Prairie Meats                                         | 163,462    |
| City of Lloydminster               | 305,726 | Public Employees Superannuation                       | 767,295    |
| City of North Battleford           | 74,044  | Public Service Superannuation                         | 296,630    |
| Crestline                          | 187,240 | RCDP/CPDN                                             | 1,228,747  |
| CUPE Local 5111                    | 67,588  | Receiver General for Canada                           | 26,333,993 |
| Dairyland Fluid Division Ltd       | 798,236 | Roche Diagnostics                                     | 401,829    |
| Danrich Environmental Controls     | 86,744  | Russell Food Equipment Ltd (S'toon)                   | 60,156     |
| Deloitte & Touche                  | 92,964  | Saputo                                                | 299,509    |
| Department of Laboratory Medicine  | 52,535  | Sask Energy                                           | 650,496    |
| Dynacare Kasper Medical Labs       | 121,353 | Sask Health                                           | 60,595     |
| Epcor                              | 104,929 | Sask Power                                            | 1,171,108  |
| Fiber Tech Canada                  | 167,110 | Sask Tel                                              | 736,017    |
| Fort Battleford Urban Metis        | 82,325  | Saskatchewan Association of Health Care Organizations | 4,383,466  |
| General Electric Medical Systems   | 82,409  | Saskatchewan Health Care Employees Pension Plan       | 6,890,409  |
| Getinge/Castle Canada Ltd          | 65,758  | Saskatchewan Property Management Corporation          | 1,016,409  |
| Grand & Toy                        | 169,464 | Saskatchewan Registered Nurses Association            | 155,921    |
| Great West Life Assurance Company  | 643,164 | Saskatchewan Union of Nurses                          | 390,824    |
| Health Sciences                    | 89,912  | Schaan Healthcare Products                            | 1,025,421  |
| Ikon Office Solutions              | 236,072 | Shoppers Drug Mart                                    | 216,924    |
| Independent Medical Rehabilitation | 70,656  | Source Medical                                        | 884,264    |
| Intercity Packers Ltd              | 50,630  | Steris Canada Inc                                     | 215,992    |
| JB Lockers Ltd                     | 70,636  | SU Canada, Ltd                                        | 202,670    |
| Johnson & Johnson Medical Products | 291,313 | Sunspun Food Service                                  | 530,478    |
| Johnson Controls                   | 67,869  | Sysco Serca                                           | 815,217    |
| Kemsol Products Ltd                | 127,215 | Tyco Healthcare Group Inc                             | 175,843    |
| Marian Press Ltd                   | 93,235  | Unisource Canada Inc                                  | 185,995    |
| Maquet Dynamed                     | 79,037  | Vital Aire                                            | 78,281     |
| Maritime Life Assurance Company    | 155,426 | Vitality Foodservice Canada Ltd                       | 117,924    |
| Marsh Canada Ltd                   | 332,986 | Westpm Bakeries Limited                               | 52,753     |
| McKesson Canada Corporation        | 883,049 | Worker's Compensation Board - Alberta                 | 97,217     |
| Meadow Lake Associate Clinic       | 206,217 | Worker's Compensation Board - Saskatchewan            | 1,788,889  |

PRAIRIE NORTH REGIONAL HEALTH AUTHORITY  
PAYEE DISCLOSURE LIST  
For the Year Ended March 31, 2005

Transfers

Other Expenditures

Listed by program, are transfers to recipients  
who received \$50,000 or more

Listed are payees who received \$50,000 or more  
for expenditures not included in the  
above categories.

|                                        |           |
|----------------------------------------|-----------|
| Battleford Early Childhood Development | 85,514    |
| Battleford Family Health Center        | 616,665   |
| Canadian Mental Health Association     | 127,179   |
| Children First Child Care              | 168,582   |
| Early Childhood Services               | 169,127   |
| Edwards Society Inc                    | 291,236   |
| Learning Tree Child Development        | 95,434    |
| Libbie Young Centre Inc                | 293,032   |
| Lloydminster Emergency Care            | 1,178,329 |
| Marshall's Ambulance                   | 354,595   |
| MD Ambulance Care Ltd                  | 195,808   |
| Playtime Cooperative Childcare         | 80,000    |
| Villa Pascal                           | 1,200,608 |
| Walter A Slim Thorpe Recovery Centre   | 421,832   |

|                         |         |
|-------------------------|---------|
| Abdel-Salam, Dr. E.     | 58,481  |
| Abouhamra, Dr.          | 63,714  |
| Ali, Dr. Fazal          | 204,505 |
| Bekker, Dr. Leon        | 249,427 |
| Cassim, Dr.             | 62,113  |
| Cholin, Dr. Brenda      | 245,133 |
| Cross, Dr. Jim          | 117,128 |
| Dala, Dr. G.            | 229,836 |
| Duncan, Dr. D.          | 286,650 |
| Henstock, Dr. H.D.      | 92,548  |
| ibarreta, Dr. N.        | 299,108 |
| Mahmood, Dr. Y.         | 317,384 |
| Marcelo, Dr. M.         | 324,240 |
| Niemand, Dr. Christiaan | 55,866  |
| Ntambazi, Dr. Matthew   | 253,950 |
| Obikoya, Dr. Olubankole | 284,016 |
| Pentz, Dr. D.           | 77,193  |
| Putter, Dr. H.          | 62,171  |
| Ramachandran, Dr. K.    | 324,980 |
| Ramachandran, Dr. N.    | 310,622 |
| Retief, Dr. Wilhelm     | 59,495  |
| Rogers, Dr. R.M.        | 77,732  |
| Sam, Dr. Veronica       | 105,000 |
| Urbani, Dr. Gian        | 61,519  |





## HOW TO REACH US

### Prairie North Health Region

Battlefords Office

1092 - 107 Street

North Battleford, SK

S9A 1Z1

Phone: (306) 446-6606

Fax: (306) 446-4114

### Prairie North Health Region

Lloydminster Office

3820 - 43 Avenue

Lloydminster, SK

S9V 1Y5

Phone: (306) 820-6181

Fax: (306) 825-9880

### Prairie North Health Region

Meadow Lake Office

#1 - 711 Centre Street

Meadow Lake, SK

S9X 1E6

Phone: (306) 236-1550

Fax: (306) 236-5801



